University of Alberta

Body Image and Physical Activity in Midlife Women

by

Janet Lynn Chambers

A thesis submitted to the Faculty of Graduate Studies and Research in partial fulfillment of the requirements for the degree of Master of Science

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Abstract

The purpose of this grounded theory study was to explore the complex interplay between physical activity and women's body image in midlife. Twenty four women from 44 to 61 years old were interviewed twice using a semi-structured interview guide that focused on past and current body image, physical activity, social roles, and social expectations for women's bodies. The findings suggest that for some women, pressure to be thin motivates their participation in physical activity. Other women expressed feeling better about their bodies with regular activity. Women's experiences with body image and physical activity fluctuated and changed according to structural and cultural influences within the context of their experience. As health professionals, becoming more aware of the intricate relationship between body image and physical activity may facilitate practice that encourages women to develop a more healthy relationship with their bodies.

University of Alberta

Faculty of Graduate Studies and Research

The undersigned certify that they have read, and recommend to the Faculty of Graduate Studies and Research for acceptance, a thesis entitled Body Image and Physical Activity in Midlife Women submitted by Janet Lynn Chambers in partial fulfillment of the requirements for the degree of Master of Science.

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Chapter 1

Introduction

The concept of women's health has developed and evolved over time. Women's health research used to be narrowly defined as reproductive health (Johnson & Fee, 1997). Currently, women's health is seen to be dependent upon complex interactions between a women's biology, health behavior, and the historical, economic, and socio-cultural context of women's lives (Cohen, 1998). It is critical to understand the context of women's experiences within their world (Fogel & Woods, 1995). Women's diversity with respect to factors such as age, race, ability, socio-economic class, and education should be considered when women's health needs are addressed (Cohen, 1998).

There is a dramatic increase in the numbers of contemporary women in midlife (Jacobson, 1995). Midlife women comprise approximately one sixth of the Canadian population and this number will increase over the next ten years as the baby boomers age (Foot, 1996). Midlife has been seen as a holding area on the way to old age where one prepares for the rigors of the last phase of life (Baruch & Brooks-Gunn, 1984). Fogel & Woods (1995) suggest that midlife is more than a preparation for old age as it is also a period of satisfaction, competence, growth and creativity.

Many midlife women experience body image disturbance as they encounter the effects of aging (Chrisler & Ghiz, 1993). Body dissatisfaction is pervasive (Brownell, 1991a) and affects women of all ages (Lutter & Jaffee, 1996; Stevens & Tiggemann, 1999). The societal pressures to be thin exist in midlife women as well as in the younger women (Cash & Henry, 1995; Tiggemann & Stevens, 1999).

Population aging is a boom for body image business because, as people get older, they become more susceptible to the marketing of strategies to maintain a youthful appearance (Foot, 1996).

The pressures to conform to the thin ideal clearly have a structural bias perpetuated by the media, fashion, and fitness industry (Williams & Germov, 1999). The 1970's embraced the super fit, thin ideal as a celebration of women's strength and control (Williams & Germov, 1999). The body image industries used this formula for success in the promotion of the thin, fit body. Increased exercise or physical activity was recommended for those wanting to avoid being fat (Brown & Jasper, 1993). Poulton (1996) suggested that fitness is just a euphemism for thinness. Today's ideal is to be exceptionally lean and physically fit (Brownell, 1991a) with exercise being a component of the current prescription for the ideal body (McKinley, 1999).

Health Canada (1999) in their paper outlining women's health strategies recommended the initiation of health promotion programs to counter inactivity and increase active living and fitness among women of all ages. Exercise or physical activity should be encouraged for all midlife women because of the positive effects on total health (Fogel & Woods, 1995; Smith, 1998). Exercise patterns formed in early adult years may be dropped by the time women reach midlife as family demands and work constraints increase (Fogel & Woods, 1995). However, the benefits of diet and exercise are also marketed as a means of defying aging and "looking good." Women's values, lifestyles, and roles must be taken into account when encouraging health-promoting behaviors (Health Canada, 1999).

Health promotion programs need to encourage healthy lifestyles by promoting body satisfaction and body diversity as well as healthy eating and moderate exercise (Williams & Germov, 1999). Health promotion programs must take responsibility for advocating for and empowering both individuals and communities to deal with the social context of health (Cohen, 1998). There is a need to focus on social change as one strategy that will enable women to maximize their own health (Cohen & Sinding, 1996). Health promotion programs must combine diverse while complementary collaborative approaches (Thurston & O'Connor, 1996). Principles of health promotion need to be applied when developing programs around women's health.

The nature of the relationship between body satisfaction and the degree of exercise participation is complex and multifaceted (Davis, 1997). Qualitative health research can provide depth and insight into people's experiences and the social contexts that strengthen, support, or diminish health (Nutbeam, 1998). Qualitative methods that focus on the in-depth discovery of the meaning of body image and physical activity are limited (Wolszon, 1998). There is a need for further studies into midlife women's health related issues (Banister, 1999; Cohen, 1998; Fogel & Woods, 1995) with identified gaps in the knowledge of body image (Chrisler & Ghiz, 1993; Pruzinsky & Cash, 1990). Women's health research forms the knowledge base upon which effective health promotion programs can be developed and delivered (Cohen, 1998).

Purpose of the Study

Based on the importance of the topic of body image and physical activity to the health of midlife women, the purpose of the study was to explore the relationship between these two phenomena as experienced by midlife women.

Chapter 2

Literature Review

Large numbers of North American women are dissatisfied with their bodies (Cash & Henry, 1995; Davis, 1997). Anxiety about body weight and shape starts at an early age for females and frequently impacts on women's well-being (Wolszon, 1998). Women's body image is influenced over time by both individual and socio-cultural factors. It is thought that there is a link between body image and physical activity as women make attempts to improve their bodies through exercise (Davis, 1997). The relationship between women's body image and physical activity is seen to be complex and dynamic (Lenskyj, 1993). This chapter will provide a critical review of the literature to develop an understanding of previous work on this topic as a basis for the development of the research question.

Literature addressing midlife women's experiences with body image and physical activity throughout their adult life span will be considered in the overview. Much of the current research on women's feelings about their bodies has been collected on young women (Allaz, Bernstein, Rouget, Archinard, & Morabia, 1998). Little is known about weight satisfaction and body image concerns in midlife women (McAuley, Bane, Rudolph, & Lox, 1995). Additional research needs to be directed at an improved understanding of body image concerns of midlife women.

Women in Midlife

Midlife women account for a growing proportion of the population (Fogel & Woods, 1995). Midlife has been defined in many ways. Age boundaries, such as 35 years to 65 years, differentiate midlife from young adulthood and old age (Fogel &

Woods, 1995). Others define midlife according to physiological changes such as menopause, role shifts, or a feeling of being in midlife (Banister, 1999; Baruch & Brooks-Gunn, 1984; Jacobson, 1995; Smith, 1998). The boundaries of midlife need to be fluid and constructed by society and the women themselves. The middle years may be renamed and lengthened in light of the changing societal norms caused by the baby-boom generation and increasing productive longevity (Jacobson, 1995).

Midlife has been characterized as a transition rather than a distinct life cycle phase (Fogel & Woods, 1995). The midlife transition encompasses the process of change in identity, roles, relationships and abilities (Jacobson, 1995). Indicators of healthy transition are self-declaration of well-being, mastery of new roles, and healthy relationships. The study of successful transition needs to be a major theme of future practice and research (Jacobson, 1995). More information surrounding the pivotal midlife transition is needed so that grounded theories of successful aging within the context of evolving societal norms can be developed.

Bias in theory and research in the past presented an often gloomy and inaccurate picture of midlife (Baruch & Brooks-Gunn, 1984). Earlier studies were based primarily on male subjects and conducted by male researchers (Jacobson, 1995). Cohen (1998) suggested that gender needed to be recognized as a key determinant of health. She argued that gender needed to be understood as a social and cultural phenomenon with further research being required through interdisciplinary, collaborative efforts.

Banister (1999) studied women's midlife experience through their changing bodies. Using an ethnographic approach, 11 midlife women aged 40-53 years were

interviewed and participated in a focus group to discuss their perceptions and experiences with midlife. The results suggested that women's midlife experiences encompass a broad spectrum full of contradiction and change. The major themes identified were issues of loss, cultural influences that perpetuate ageism and sexism, lack of consistent information about menopause, questioning, redefining self, and self-care. These major themes all played a central role in women's lives during this time of transition.

Appleton (1994) looked at midlife women's experiences using a phenomenological approach to qualitative research. Several major themes were identified in the study. Women spoke of feeling more alive yet being reminded of being older. Women experienced a passion for living that distinguished midlife from earlier years. Women talked about a newfound freedom that comes with midlife, the freedom to choose happiness, pursue interests, slow down, or heat up. These themes portrayed life processes and patterns that affected the well-being of the midlife women. These two qualitative studies exploring midlife women's experiences illustrated common themes of transition and change around this important time in women's lives. Further research is needed on midlife women's experience to add to the understanding of this phenomenon.

There is a need for more research to focus on midlife women's health (Fogel & Woods, 1995). Interdisciplinary research that will integrate the basic and social sciences within a life span approach would add to the knowledge of midlife women (Johnson & Fee, 1997). The diversity of experience with midlife women and the consideration of culture, class, race, and cohort needs to be emphasized (Baruch &

Brooks-Gunn, 1984). Women should be involved at all levels of the research process with the opportunity to offer input (Cohen, 1998).

Researchers in women's health need to develop a women-centered definition of female health that will improve the well-being and productivity of women throughout the world (Johnson & Fee, 1997). One challenge presented for women's health research is to conduct collaborative and interdisciplinary studies involving both quantitative and qualitative methods (Lefebvre, 1996). Sensitivity to gender issues must be considered within the research agenda (Thurston & O'Connor, 1996). With further exploration of women's experiences in midlife, deeper insights into the phenomenon will be developed and understood (Jacobson, 1995).

Body Image Defined

Slade (1994) defined body image as a "loose mental representation of the body's shape, form, and size, which is influenced by a variety of historical, cultural and social, individual and biological factors which operate over varying time spans" (p. 502). Three aspects of body image are described in the psychological literature (Loland, 1998). These included a perceptual component, as in body size perception and accuracy, a subjective component which involved aspects of satisfaction, concern, and anxiety, and a behavioral component which focused on the degree to which a person's behavior reflects his or her feelings about his or her body. There is good reason to believe that body image has both relatively fixed psychological components, and relatively fluid components (Davis, 1997; Pruzinsky & Cash, 1990). Short-term situational factors can result in fluctuations in body images. Body image

is a uniquely individual experience for each woman as influenced by the context of one's life situation.

Body image, the manner in which we view our body and the mental representation we have of it, forms an integral part of our self-esteem and overall self-worth (Davis, 1997). Self-esteem is conceptualized as a multifaceted construct that includes the physical domain of self-esteem, also referred to as body esteem (Asci, Kin, & Kosar, 1998; Finkenberg, Dinucci, McCune, & McCune, 1994). Body esteem is the value or worth an individual attaches to his or her body (Fox, 1997). A person's body image is shaped in significant ways through factors that influence each individual differently.

Research in self-esteem considered the important components of physical self-concept in the development of a multidimensional physical self-concept scale (Fox, 1997; Marsh, 1997). This research suggested that the significance of the physical self as an entity played an important part in the structure of the whole self. The developments in the measurement of physical self-concept documented links between the physical self and related behaviors. The physical self-concept scale measured sport competence, attractiveness, physical condition and strength (Fox, 1997). Fox (1997) argued that the physical self is a powerful component of the self-system and that it is critical that we use approaches to research that can measure the dynamics of self-esteem change. More focussed study on the physical self has practical relevance for the design of effective interventions in sport and exercise.

Individual Factors Influencing Body Image

A woman's perception of her body image is influenced by many different factors. Davis (1997) described endogenous influences on body image as including factors that are biological in nature and factors that form part of one's persona. Low self-esteem, negative attitudes and depressed moods have been associated with poor body image. Race, culture and gender role orientation also influence one's body image (Davis, 1997). Attitudes towards aging have important implications for women (Cohen, 1998; Spitzack, 1990). The influence of aging on body image will be discussed later as it pertains to the experiences of midlife women.

Studies have shown that genetic and physiological factors are instrumental in determining body weight and shape (Brownell, 1991a). Women, therefore, do not have full control over their body appearance. Davis (1997) claimed that body weight and body fat content have consistently been found to correlate positively with measure of body dissatisfaction and of feeling 'fat'. However, the notion of a medically set standard of weight is misleading. The issue of weight monitoring leads to promises from health professionals that with diet and exercise, one can alter their body size and shape. These messages of the body being malleable are further supported in the media and the diet and fitness industry. Women falling short of the ideal may be left feeling dissatisfied with their current body size and shape. The belief that everyone can look like the aesthetic ideal is false and potentially hazardous to women's self-esteem (Brownell, 1991a; Joanisse & Synnott, 1999).

Socio-cultural Factors Influencing Body Image

The societal ideal of being very thin has become the standard for female attractiveness (Davis, 1997; Delaney, O'Keefe, & Skene, 1997). Being slim is associated with youth, self-control, elegance and social attractiveness while obesity is associated with isolation, failure, and unattractiveness (Furnham, Titman, & Sleeman, 1994). Slenderness speaks of femininity, beauty, and success (Maguire & Mansfield, 1998). The idea that thinness is attractive, desirable, and healthy is so pervasive in our society that it often goes unchallenged (Brown & Jasper, 1993). Seid (1994) argued that the pursuit of a lean, fat-free body has been elevated into a new religion that rewards the successful with promised beauty, energy, health, and a long prosperous life. Many women strive for the images of beauty that are presented in the media even though they may be unrealistic and unattainable.

Brownell (1991b) argued that women believe the perfect body symbolizes control, hard work, ambition, and desire. Many women have attempted to gain control of their lives by controlling their bodies (Brown & Jasper, 1993). Spitzack (1990) suggested that women attempt to take control of their bodies through weight loss rather than allowing their bodies to control them. There is a risk in overestimating the amount of control one has (Brownell, 1991b). Control for women over their bodies must be considered within the context of biological realities.

Weight dissatisfaction has different meaning for men and women (Cash & Roy, 1999). Women measure their worth by their weight such that a number on the scales often dictates how women feel about themselves. The feminist literature suggests that physical appearance has important consequences for women in that

women's attractiveness equates with social and interpersonal success (Rothblum, 1994). Spitzack's (1990) research revealed that women speak to a relationship between attractiveness and power. Achieving power is dependent on a combination of healthy behavior and a healthy appearance. Women wish to be thin and fit so that they are perceived as being healthy and as having desirable personal qualities. Women's social and economic success can still be largely determined by their beauty while men are judged more by how they act and what they accomplish (Seid, 1994). Looks continue to be of primary importance for female success.

The media reinforces these stereotypes about the importance of physical attractiveness for women. Advertising on television and in magazines includes numerous suggestions for slimming devices and formulas to assist in efforts to reshape the body. Advertising imagery talks about "natural beauty" combined with a "healthy glow" (Spitzack, 1990). Contemporary programs to reduce body size often are designed to appeal to health. As well, the health sector frequently sends messages equating health with thinness (Williams & Germov, 1999).

Women's pressure to conform to the thin ideal has a structural basis with influence from social institutions as well as media, cosmetic, and fashion industries (Williams & Germov, 1999). Wooley (1994) stated that there is strong support for the conclusion that women's body hatred is structural and built into the system. He suggested that women are flooded with idealized images of women's bodies as well as images of "real" women being in need of change, repair, improvement or better health.

Studies have shown that discrepancy in perceived and ideal body sizes adds to the dissatisfaction women feel with their body image. Kennett & Nisbet (1998) studied 184 undergraduate women and found that an overwhelming number of "normal" weight women feel fat and wish to lose weight. This study supported the finding that university women experience social pressures to be thin. There is no corresponding research on the experiences of midlife women.

Delaney et al. (1997) studied the societal components of young women's experiences with weight and shape and investigated the underlying structure of these expectations. The researchers interviewed 16 high school and university students to develop a 101-item questionnaire. Questionnaires were then given to 287 university students. The results suggested that women's experiences with body image concerns could be understood as a multidimensional construct, with both individual focussed and contextual elements. The results validated the contention that women's feeling about their bodies cannot be meaningfully separated from their social and socio-cultural frameworks.

Research that focuses only on the individualist ideology deflects attention away from the social, ethical, and political dimensions of the problem (Wolszon, 1998). Women's body image practices and concerns are found within a host of intersecting cultural traditions surrounding womanhood, femininity, beauty, and family. Post-structuralist theories of human agency offered further explanation as to the way women respond to the social pressure of being thin (Williams & Germov, 1999). The women themselves internalize the social control of women's bodies. Women play an active role in reproducing or resisting the thin ideal. Self-esteem

becomes deeply connected to body size and shape (Brown & Jasper, 1993). This internalization of the fashionable body image can be damaging and limiting for women as they strive to meet the cultural standards of beauty and success.

It is important to recognize the importance of the structuralist and post-structuralist perspectives on understanding why some women attempt to achieve the thin ideal (Williams & Germov, 1999). Researchers need to understand the setting or contexts within women's experiences. Further research needs to be conducted to consider the body image influences, both individual and contextual, for women across the life span.

Body Image and Midlife Women

Thinness has become a common social and cultural norm among young women in developed countries (Allaz et al., 1998). Preoccupation and often dissatisfaction with body weight is common in these young women. Little is known about body image satisfaction in midlife women (Chrisler & Ghiz, 1993). Research on midlife women's experience with body image would add to the understanding of this important phenomenon.

The media continuously sends messages about standards of attractiveness and youthfulness (Wilcox, 1997). Media images frequently suggest that youth is beautiful and that old age is to be avoided at all costs. Older women are shown as clumsy, plump, and comical while the younger women are portrayed as vulnerable, sexually alluring, and outgoing (Rothblum, 1994).

In consumer culture, the representation of the female body encourages women to adopt strategies to combat aging (Williams & Germov, 1999). The attractive older

woman is said to not "look" her age if she has taken steps to prevent the physical signs of aging (Spitzack, 1990). This appreciation for the older woman requires women to regulate and restrict their bodies well beyond their youth. Cosmetic surgery in one way that women can recreate their youthful look, and thus repair the damage caused by simply having lived (Spitzack, 1990). The media has much to lose if women ceased to be influenced by these messages and thus spent less on clothing, makeup and surgery in their attempts to look younger (Wilcox, 1997).

Three studies have looked at body image preoccupation and dissatisfaction in older women. Cash & Henry (1995) conducted a representative survey of body images of 803 American women aged 18-70 years. Interviewers called door-to-door and left survey booklets to be collected the next day. The multidimensional body-self questionnaire included an appearance evaluation scale, a body areas satisfaction scale, and an overweight preoccupation scale. Results showed that there were substantial levels of body dissatisfaction with nearly one-half of the women reporting globally negative evaluations of their appearance and a preoccupation with being or becoming overweight. Age was categorically reported on the survey in five age groupings. The 18-24 year old women had a more favorable body image than did older women. Compared to survey data collected in 1985, there is concern that women's body image evaluations have worsened considerably despite recent economic, occupational and political gains of some women in the United States (Cash & Henry, 1995).

A similar quantitative study was conducted in Geneva, Switzerland, looking at body weight preoccupation in 1,053 women aged 30 – 74 years (Allaz et al., 1998). The women were also placed into one of five age groupings. Their desired weights

were obtained and calculated against their actual weight. Results showed that 71% of women in the general population of Geneva wanted a lower body weight. Weight dissatisfaction increased with increasing current weight but a majority of normal weight women still wanted to be thinner. The authors concluded that social pressure to be thin observed in younger women also exists in middle-aged and older women. thus resulting in chronic dissatisfaction with weight in women across the life span.

Wilcox (1997) studied age and gender in relation to body attitudes in 144 men and women. Participants aged 20 – 80 years were tested on their self-perceptions of the relationship between body attitudes and aging. There were six age groupings with an age range of 10 years for both men and women participants. The variables included self-esteem, health, masculinity, appearance orientation, and exercise participation. The researcher found that there were no age, gender, nor age x gender differences in body attitudes. Wilcox 91997) questioned whether individuals adjust their standards of attractiveness as they age so that they compare themselves with their peers. A limitation of this study involved the use of a cross-sectional design. It is not known how middle-aged and older adults perceived their appearance when they were younger adults. Therefore, it can not be determined whether age related changes occurred for this research sample.

Exercise participation was an additional variable examined in relation to body attitudes (Wilcox, 1997). Exercise participation was found to be related to body attitudes among the women but not the men. For women exercisers, increasing age was associated with greater body satisfaction. In women non-exercisers, the relationship was just the opposite. These tentative results suggest that exercise may

benefit older women's body attitudes. Further research is required to provide further support and understanding to the relationship between physical activity and body image satisfaction.

The research suggests that the social pressure to be thin observed in younger women also exists in midlife and older women. Further research that considers age differences in body image will add to our knowledge of aging, female socialization, and body image. More attention and research needs to be directed at understanding the consequences of older women trying to attain cultural standards of beauty. Since most of the previous research has been quantitative in nature, qualitative research methods would hold potential to increase the understanding of the unique personal situations of aging women in the context of their experiences with body image.

Body Image and Physical Activity

More people are physically active today on a regular basis than ever before (Smith, Handley, & Eldredge, 1998). Industries have arisen around weight control and exercise as evident in the popularity of fitness centres, workout videos, sports clothing, and personal exercise equipment (Poole, Isaacs, & Jones, 1997). The fitness industry promotes activities for beauty more than for health (Vertinsky, 1998) with the expected outcome of physical perfection (Davis, 1997).

The notion of a socially constructed physical body suggests that the body is somehow shaped, constrained, and even invented by society (Sparkes, 1997). There is a drive for new programs, devices, medicines, and diets to make one healthier, slimmer, fitter, and more aesthetically pleasing (Brownell, 1991a). This trend in today's society may reflect an increasing dedication to health and fitness or an

increasing preoccupation with physical appearance, such that modern society breeds a search for the "perfect" body. The work of Shilling (1993) suggests women treat their bodies as "projects" in which they are conscious of and actively concerned about the management, maintenance, and appearance of their bodies. There is a tendency for the body to be seen as an entity which is in process of becoming, a project which needs to be worked on.

Many women exercise as a means of controlling their appearance and their body weight, yet there is concern with the notion that one can totally regulate their physical appearance through exercise (Poole et al., 1997). Language used in the fitness industry like "new body" and "body sculpt" all suggest that bodies can be molded and changed. Brownell (1991a) suggested that the levels of leanness and fitness being attempted are not possible to achieve with healthy and reasonable levels of dieting and exercising. The percent body fat required for the aesthetic ideal is less than half the normal level.

Society equates thinness with fitness and physical attractiveness (Lenskyj, 1993). Cultural standards of attractiveness add to the possibility of body dissatisfaction that results from a discrepancy between perceived and ideal body sizes and shapes (Davis, 1997; Smith et al., 1998). This expectation leaves women feeling dissatisfied if their body does not match up to the ideal as presented by societal norms. This leads many women to attempt to alter their own body size and shape. They may feel cheated if their body does not change as expected with a regulated exercise and fitness program. Given the pressures to be slim and attractive, having a positive body image and a healthy lifestyle presents challenges for many women.

Motivation for Exercise

In our contemporary society, women are presented with numerous ways to alter and control their appearance with the promise that bodies are dynamic and changeable. This expectation of changing and molding one's body leads many women to exercise programs. It is important to look more closely at body image motivators for exercise. What are the reasons that women give for wanting to exercise? How do their feelings about their bodies affect their motivation for being active? These questions are important to consider and will add to the understanding of the relationship between body image and physical activity.

A number of researchers have investigated the role that body image satisfaction plays in exercise motivation. Two quantitative studies have explored this relationship with university students. Cash, Novy and Grant (1994) questioned 101 female nursing students to determine why women exercise and to validate their "reasons for exercise" inventory. This inventory included the scales to assess fitness/health management, appearance/weight management, stress/mood management and socializing. Factor analysis showed that the management of weight and appearance is a stronger motivator in these young women than are the other motives for exercise. Women reporting greater distress about their physical appearance were especially likely to give appearance or weight management as their motive for exercise.

Smith et al. (1998) expanded the Cash et al. (1994) study to look at the associations between reasons for exercise, frequency of exercise and body image satisfaction in 100 undergraduate women and 67 men in various majors. They found

that among women health and fitness concerns were somewhat predictive of exercise, unlike the appearance and weight control reasons given in the Cash et al. (1994) study. Studies investigating motivation to exercise are difficult to compare due to differences in methodology. However, the possibility that women exercise for health and fitness reasons rather than for appearance is an encouraging one. These findings suggest that the relationship between motivation and physical activity is complex and interrelated within the context of women's experience. Further research is needed to identify motivators for exercise.

Qualitative research allows for further exploration and understanding of the complex issue of body image and motivation for exercise. Frederick & Shaw (1995) conducted a combined qualitative and quantitative study on young university students to look at motivations for participating in aerobics classes as well as body image constraints for enjoyment. Women generally described their motivation to participate as being weight loss, body toning, or other aesthetic body improvements. The conclusions drawn by these researchers were that societal pressures to be slim with a desire to improve their appearance were often at the root of the motivation to participate in aerobics.

Maguire & Mansfield's (1998) qualitative study also looked at participation in aerobics class and the behavioral and emotional rituals of women aged 19 – 50 years, as outlined by an "exercise - body beautiful complex" (p.110). The researchers combined observations of 40 women over a 6-month period and interviews with 16 participants. They found that the women in this study expressed common aspirations to be slim and toned. The women viewed aerobics as a tool for achieving this slim,

toned 'look' and their bodies as projects to work on. The women, while feeling empowered and confident about being active, also shared feelings of shame and disgust when their bodies failed to conform to social norms. The women felt themselves subject to pressures in the pursuit of the perfect body and the aerobics ended up having primarily negative outcomes for these women in terms of their body image. This study indicated that a desire to be thin is a strong motivator for physical activity in young women and in older women.

Barriers to Exercise

Body image may also act as a barrier or a constraint to exercise. As well as looking at motivation to exercise, Frederick & Shaw (1995) investigated body image as a constraint to young women's participation and enjoyment in aerobics classes. The interview questions looked at the participants' perception of the classes and how their feelings about their body affected participation in and enjoyment of class. Body image concerns did not seem to have a significant effect on the participation levels of women but did lead to decreased enjoyment for participants. The women felt that the exercise clothing they wore made them feel less confidant and that there was a perception of competition in the class to look good. Appearance concerns were barriers to full enjoyment of the aerobics class.

Several studies have looked at the relationship between social physique anxiety and exercise behavior in middle-aged adults (Eklund & Crawford, 1994; Lantz, Hardy & Ainsworth, 1997; McAuley et al., 1995). Social physique anxiety has been conceptualized as the anxiety experienced when one perceives others to be negatively evaluating one's physique. McAuley et al. (1995) claimed that the

primary reason for overweight female exercisers to avoid exercising in public places was the apprehension associated with being observed and evaluated. In other words, the very people who stand to gain the greatest benefit from being active prefer to be sedentary rather than experience the discomfort of physique anxiety. McAuley et al. (1995) studied men and women between the ages of 45 and 64 to look at the relationship between physique anxiety and exercise participation in middle-aged adults. They concluded that women had higher levels of physique anxiety than did the men. As well, their findings suggested that physique anxiety is one consequence of negative body image and is not solely a concern of young college females. Body image problems persist in the middle years with relatively high levels of physique anxiety being reported in 45-54 year old women.

It is interesting to note the different results from research studies looking at the role that body image plays in barriers to exercise. The discrepancies found in these studies are indicative of the need to look more closely at the complex interplay between behaviors, attitudes, and socio-cultural influences. As well, much of the present research has been conducted on young women. The prevalence of body dissatisfaction and the role it plays as a constraint for exercise on middle-aged women also needs further exploration and study. The research evidence presented has been inconclusive and contradictory and suggests the need for further study in this important area of women's health.

Exercise and Body Image Satisfaction

The nature of the relationship between exercise participation and body image satisfaction is complex and dynamic. Exercise may result in physical improvements

in tone, stamina and in weight loss. Psychological benefits of exercise include improvement in mood states and an improved sense of well-being. There may be positive effects on work behavior, sleep behavior, and overall stress relief (Furnham et al., 1994; Tucker & Mortell, 1993). Weight loss, when successful and moderate levels of exercise have been associated with enhanced self-esteem. On the other hand, both dieting and exercise in excess can result in an increased fault findings view of one's physical appearance (Davis, 1997). The health benefits of exercise are marketed as a means of defying signs of aging (Davis, 1997) and "looking good" (Poole et al., 1997). The outcomes of physical activity are numerous and varied and have a direct influence on body image.

The effect of exercise on body image satisfaction has been studied frequently in young women. Holmes, Chamberlin, & Young (1994) studied the relationship of exercise to body image in a sample of 212 university students. They found that body image was positively related to exercise level, and perceived physical attractiveness. Furnham et al. (1996) researched the perception of female body shape as a function of exercise. Their study consisted of a sample of 60 young adult women from Britain. These women used Repertory Grid Technique to rate nine sketches of naked female shapes. The researchers concluded that women who exercise have a more positive perception of their body than those who do not exercise. These two studies on young women suggest a positive correlation between exercise and satisfaction with body image.

Many of the studies looking at the relationship between women's body image and exercise behavior have been done have been on small groups of college students

(Loland, 1998). Studies need to also look at the general population of active and inactive men and women and their body image. Loland (1998) conducted a survey among Norwegian men and women, aged 18 – 67, to study body image and physical activity. A total of 1555 questionnaires were completed from a representative sample (N=2500). The research participants were grouped according to self-reported degrees of physical activity. Results showed that all groups of active women evaluated their physical appearance and fitness significantly better and were significantly more concerned with fitness that the inactive women. Moderate and high active women evaluated their bodies better than the low active women. Loland (1998) concluded that the level of intensity of activity may influence the way women see their bodies. This finding concurs with the Wilcox (1997) study that found exercise to benefit older women's body attitudes. The significance of socio-cultural pressure on physical appearance, in addition to biological differences may also be pertinent. More research is needed that focuses on the relationship between body image and physical activity with attention to age and socio-cultural differences.

Research studies have also looked at factors related to one's personality that may be associated with poor body image. Studies of both young and middle aged participants showed that participation in exercise resulted in significant reductions in physique anxiety even when controlling for reductions in body fat and weight (Lantz et al., 1997; McAuley, Bane, & Mihalko, 1995). Asci et al. (1998) conducted a quantitative study with 45 female university students from the Middle East Technical University that examined the effect of exercise participation on physical self perception and body image satisfaction. These authors claim that self-esteem is the

psychological variable with the greatest potential to reflect psychological benefits from exercise. Fox's (1997) physical self perception profile was the instrument used to measure sports competence, physical strength, body attractiveness, and overall physical self worth. This study did not find any significant differences in physical self perception and body image satisfaction levels among research participants in an 8-week exercise program. The researchers questioned whether the intervention was sufficiently intense to produce the expected outcomes.

Other authors have looked at the interplay of body esteem, self esteem and exercise behavior. Finkenberg et al. (1994) conducted research on personal incentives for exercise and body esteem with 210 university women. They found that regular engagement in physical activity appeared to have both physical and mental benefits, including a more positive evaluation of one's body and the development of a more positive body esteem. McAuley, Mihalko, & Bane (1997) researched exercise and self-esteem in adults aged 45 – 64 years. They considered the roles played by physical fitness, body composition, self-efficacy, and exercise participation as possible contributors to changes in physical self-worth for a group of sedentary middle aged males and females. The participants participated in a 20-week exercise program. At the end of the program there were no firm conclusions about the benefit of an exercise program in enhancing the elements of self-esteem in older adults. These studies offer conflicting results. McAuley et al. (1997) suggested that the extent to which exercise causes changes in self-esteem required further research confirmation. There is a need to further explore the dynamics of the relationship between exercise and body image.

Health professionals frequently encourage exercise to enhance health and fitness. Tucker & Mortell (1993) compared the effects of walking and weight-training programs on body image in middle-aged women aged 35-49 years. Sixty-five sedentary normal weight women participated in one of the two exercise groups for a period of 12 weeks of training. Both groups gained significantly in measures of body image (body cathexis) during the study with the lifters showing significantly more improvement than the walkers. Improvement in body image was associated with participation in the interventions. Limited conclusions were drawn due to the small sample size and lack of a control group. Further research studies were indicated to determine the benefits of specific exercise activities and the effect on health.

Saltonstall (1993) conducted a phenomenological study to understand the concept of health in terms of men and women's practices in everyday life. Twelve women, aged 35-55 years, were interviewed. The women shared that exercise was one behavior that they did to remain healthy. Body maintenance activities were seen as being essential to producing health for one's self. The women were concerned with maintaining function and capacity but they were equally concerned with maintaining the appearance of their bodies in a "presentable" condition. There appeared to be a connection between exercise and health and fitness. Further research is needed to define the relationship more clearly.

Older women and exercise practices were explored in a qualitative study by Poole et al. (1997). The researchers interviewed seventeen female exercise instructors between the ages of 52 and 73 to learn why they had a commitment to

exercise. They found that participation in exercise made them "feel good" with more energy for living. They also talked about the value of sociability as giving meaning to their lives and the lives of others. They experienced feelings of self-worth, respect and social power. Their participation in exercise had positive outcomes in terms of health and wellness.

Research studies that considered the effects of exercise on body image satisfaction have had mixed results. There is support for the positive relationship between physical activity and an improved body image in younger women. As well, there seem to be physical and mental benefits from exercise. The health benefits of exercise are supported in the literature for middle aged and older women. Further studies are needed to look at the complex interface between body image and physical activity throughout women's life span.

Implications for Research

The characteristics of the dynamic relationship between body image and exercise participation are complex and multifaceted. There are inconsistencies in the research findings. For example, involvement in exercise can be related to improvements in the sense of physical competence and in improved tone and weight loss (Loland, 1998). These short-term factors may enhance self-esteem. However, excessive exercising may result in an increased preoccupation with one's body (Davis, 1997). Women's idealized body image may begin to shift towards a thinner standard with further personal dissatisfaction. Women in certain sports where thinness presents an advantage such gymnastics, divers, and dancers, are highly weight preoccupied and dissatisfied with their appearance (Furnham et al., 1994).

Some activities may promote more satisfaction than others, for example, weight lifting and bodybuilding (Davis, 1997). Body image and individual factors exert important influences on behaviors and attitudes. These factors need to be explored so to better understand the context of the women's experiences. Further research is warranted to discover the interplay among the factors involved.

There is also much evidence to suggest that women's experiences with body image are multidimensional constructs, and that contextual elements as well as individual elements must be considered (Delaney et al., 1997). Much of the previous literature on women's body image has been conceptualized from an individual centered framework. Socio-cultural factors such as the fitness industry, sports clothing and media influences have not been addressed to the same degree. Further qualitative exploration into understanding women's experiences within the context of their life situation need to be done (Maquire & Mansfield, 1998; Poole, Isaacs, & Jones, 1997). Women are left dealing with individual struggles with body image acceptance rather than coping with highly conflicting societal messages to be thin. These interpersonal and contextual factors need to be considered in research design (Delaney et al., 1997). Both qualitative and quantitative methods are indicated to allow for a more comprehensive picture of the dynamics of body image and physical activity.

Attitudes toward aging have important implications for how older women view their bodies and how they deal behaviorally with the process. Body dissatisfaction does not appear to diminish much with age or be altered significantly across much of the adult lifespan (Davis, 1997). The societal preoccupation with

youthful beauty requires women to pursue the adolescent ideal throughout their lives (Vertinsky, 1998). Middle-aged and older women may try to challenge aging by using strategies such as exercise. The beauty myth that appearance can be infinitely improved and changed continues in later years. Further research on middle-aged and older women would add to the understanding of the phenomena.

Vertinsky (1998) looked at the enhancement of female health through exercise and the challenges inherent for women in ensuring social equity in opportunities for exercise. Lack of physical activity and non-participation in active leisure remains all too often the norm for many women, including working women, poor women, and aging women. Patterns of health and physical activity are not merely the choices of individuals. The factors influencing one's lifestyle practices are multiple and interactive within one's social, economic, and physical environment.

There are substantial grounds for encouraging a regular regime of physical exercise (Furnham et al., 1994). However, there is need to rethink the unrealistic images presented to women. Women must distinguish between exercising for physical fitness and exercising for the requirements of the media ideal. It is the pursuit of the perfect body that is a negative strategy for women. Women must feel free to accept the biologically normal ranges of different shapes and sizes. Health promotion strategies need to consider the broad social, economic, and cultural context of women's lives (Vertinsky, 1998). Such context-sensitive strategies may enable women be free to experience their bodies through exercise in a healthy way.

Research on women's body image and physical activity is at an early stage and needs further description (Loland, 1998). Studies looking at body image and its

relationship to self, attitudes, and psychological health have been conducted, however there has been little research on the impact of body image on other areas of life, including physical activity (Frederick & Shaw, 1995). Further knowledge of the way body image develops and is influenced and changed is important. The relationship between body image and contextual factors is not clear and further exploration into the variables that influence body image is needed (Loland, 1998; Smith et al., 1998). Cohen (1998) raised the concern that quantitative research methods alone are unable to fully capture the richness of women's own experience. There is a need for the use of both qualitative and quantitative methods to add to the understanding of these complex issues. Additional research offering an in-depth understanding is needed in order to facilitate a practice that encourages women to develop a healthier relationship with their bodies.

This chapter has provided a review of the literature around women's body image and physical activity. Personal and socio-cultural factors influencing body image have been described. Midlife women and body image was discussed. Studies looking at motivators and barriers of exercise were reviewed. The effects of exercise on body image and overall health status of women were discussed. It is evident that many research questions still exist such that one can tease out the integral relationships between these important concepts.

Research Questions

The purpose of the proposed research study was to provide an in-depth understanding of the relationship between body image and physical activity for midlife women. Specific questions guiding the study include:

1. How does the interplay between body image and physical activity influence midlife women's experience and conversely, how does midlife women's experience influence the interplay between body image and physical activity?
2. What socio-cultural factors influence body image and physical activity for midlife women?

Potential implications for an in-depth understanding of midlife women's experience with body image and physical activity are significant. By involving midlife women in the research process, it is hoped that they will be encouraged to critically reflect and question their personal experiences with body image and physical activity. Health promotion programs, workshops, and seminars for midlife women can provide consistent and accurate information about body image and physical activity. By disseminating the research findings, health professionals can help midlife women demystify societal attitudes and beliefs about midlife women and their health practices. The experiences of the women studied describe phenomena critical to both individual and collective well-being. Social and political actions to transform our appearance-biased society are also needed (Cash & Roy, 1999). There is a need for social change where we all work towards a more accepting society in which the size and appearance of one's body is irrelevant to one's overall worth.

Chapter 3

Methods

The literature review revealed gaps in the research on midlife women's experiences with body image and physical activity. These gaps suggest that there is a need for a closer look at midlife women's experiences of body image and physical activity as influenced by behaviors, attitudes, and socio-environmental factors in their day to day lives. As well, it has been recommended that further research be conducted so that a better understanding of the experiences of the midlife women in relationship to body image and physical activity is developed (Davis, 1997; Vertinsky, 1998). Qualitative research methods can add to the understanding of the meaning midlife women assign to these life experiences with body image and physical activity.

Qualitative research methods can capture aspects of human action such as context and complex meaning (Eakin & Maclean, 1992) as well as increasing understanding of the issue from the perspective of the research participants. Qualitative research allows for exploration into a social or human problem while presenting a complex, holistic picture of the views of the participants (Creswell, 1998). Qualitative research helps one to make sense of reality while describing the world of the participants (Morse & Field, 1995). The researcher explores all aspects of the phenomenon under study with consideration of the influencing factors arising from the context of the situation. Qualitative inquiry is a process of describing, identifying patterns, concepts, and relationships, and creating theoretical explanations (Morse & Field, 1995). Qualitative researchers strive for understanding the

phenomenon under study as they seek to learn about and interpret life experiences (Sword, 1999).

Qualitative research methods are conducted to explore phenomena about which little is known (Morse & Field, 1995). From the review of the literature on midlife women's experience with body image and physical activity it is clear that there is little known information from which to create a theory or to test a theory. The research questions that were developed to explore the interplay between the two phenomena within the context of women's experience fit best with an inductive approach that is directed towards bringing knowledge into view (Morse & Field, 1995). The research questions are best answered by research conducted in the naturalistic setting such that the context of women's experience with body image and physical activity can be explored.

The assumptions and procedures of qualitative methods appear to be compatible with the philosophy of health promotion practice (Eakin & Maclean, 1992). Qualitative methods give research value to the voice of individuals, consistent with the principle of empowerment theory within health promotion practice. Defined success in health promotion includes the valued outcomes of empowerment of individuals and communities (Nutbeam, 1998). Health promotion demands a multidisciplinary orientation drawing on the theoretical frameworks of a broad range of disciplines. This is similar to the trend for multidisciplinary team research. Qualitative research adds to the understanding and insight of the lived experiences of the participants involved in the study. This knowledge is essential for health

promotion practice and for the dissemination of new ideas and theories around health and well-being (Nutbeam, 1998).

Qualitative methods allow for the in-depth and detailed study of selected issues while quantitative methods focus on the study of concrete problems with measurable variables (Morse & Field, 1995). Qualitative and quantitative methods constitute alternative, but not mutually exclusive strategies that add to knowledge (Patton, 1990). Qualitative methods are best suited to understand midlife women's experiences with body image and physical activity. These phenomena need to be explored as little information exists on these topics, the variables are not easily identified, and theories are not available to explain the behaviors being studied (Creswell, 1994; Creswell, 1998). It is important to study individuals in their natural setting in order to better understand the context of the women's experience. Qualitative methods allow for rich descriptions that help to make sense of complex life experience and open a window into the world of others (Morse & Field, 1995).

Grounded Theory

Grounded theory methods as developed by Glaser and Strauss (1967) were employed in this study to develop an explanatory understanding of human behavior of midlife women's experiences with body image and physical activity. Grounded theory methods unite research with theory development (Charmaz, 1995). Grounded theory is a methodology grounded in data that is systematically gathered and analyzed (Strauss & Corbin, 1995).

The intent of a grounded theory study is to develop an explanatory theory of human behavior that is grounded in the data (Morse & Field, 1995). Grounded theory

is well suited to the study of midlife women's experiences with body image and physical activity since little has been written on the interplay between these phenomena. A theory to explain this experience of women within their world would add to the understanding of this complex relationship between women's body image and their physical activity.

Simultaneous data collection, sampling, and analysis occur within a grounded theory study (Morse & Field, 1995). The participants are selected based on their experiences with a topic and the needs of the developing theory through a process of theoretical sampling. Theoretical sampling allows one to follow up on themes, to discover variations and to define gaps (Charmaz, 1995). The process of data collection is then controlled by the emerging theory (Glaser & Strauss, 1967; Morse & Field, 1995).

Glaser and Strauss (1967) argued for generating theory using a method of comparative analysis. Grounded theory analysis is conducted using constant comparison where each new piece of data is compared with other relevant data. This constant comparative method of data analysis facilitates the identification of patterns emerging from the data (Morse & Field, 1995). Through this process, basic properties of each category are defined, the relationships between the categories identified, and the conditions made explicit. As data are collected, the categories become more descriptive and linkages, or the relationships between the categories, are identified. The theory gradually becomes more abstract and theoretical saturation occurs when no new instances can be identified and the category makes sense (Morse

& Field, 1995). Grounded theory methods are a logical and systematic way to collect and analyze data in the overall aim of developing theory (Creswell, 1998).

Grounded theory provides a perspective on behavior that has implications for practitioners working in the field (Glaser & Strauss, 1967). Research is then linked with practice in a way that theory becomes more relevant and useful. Grounded theory may allow for further insight into the complex relationship between midlife women's perception of body image and physical activity.

Overview of the Study

The purpose of this qualitative study was to explore the links between physical activity and midlife women's body image using grounded theory methods. Twenty-four women, aged 44 to 61 years, were interviewed twice using a semi-structured interview guide that focussed on past and current body image, physical activity, dietary behaviors, social roles, and social expectations for women's bodies. Analysis of the midlife women's narratives provided insight and understanding into the complex interface between physical activity and body image.

Sample Selection

The midlife women in this study were chosen from a larger research project where the author participated in data collection and analysis as a research assistant. A team of four multidisciplinary researchers was involved with data collection and data analysis. The research project explored the social and psychological factors that affect women's body image.

Theoretical sampling allowed for the collection of data that pinpointed key issues in the research (Charmaz, 1995) within the larger project. The participants

were recruited according to the theoretical needs of the research as the data analysis progressed. Women were recruited to cover a wide variety of age groups (aged 21 years to 61 years). Purposeful sampling ensured that the women in the research study had different socio-economic status, had different combinations of social roles, and had different body sizes within a wide range of body image satisfaction - dissatisfaction. The sample size adequacy was determined by the concept of theoretical saturation. A sample size of 47 women was used in the large research project.

A convenience sample consisting of all midlife women from the larger research project was chosen for the author's study. This selection of midlife women was based on age where midlife was defined as 44 – 61 years (Fogel & Woods, 1995). The sample consisted of 24 midlife women.

Recruitment

Research participants were recruited in Edmonton, Alberta and surrounding areas. Posters and brochures describing the study and asking for research participants were placed in the community at various public, government, and private centers (Appendix A). The women were recruited through a medical clinic, a breast-screening clinic, fitness centers, and agencies offering parenting and support classes for low-income women. Four of the women were recruited through the Newcomers Club of Edmonton where the author attended an evening meeting and introduced the study. Further recruitment was achieved by snowball sampling (Morse & Field, 1995) where participants talked to others that might be interested in also participating in the study.

After seven months of data collection, efforts became more focussed on recruiting younger women and women with a positive body image. This purposeful recruitment was to ensure that the data collection and analysis was moving towards theoretical saturation with no new themes or information being added with additional participants (Creswell, 1998).

Screening

Women were asked to volunteer to participate in two semi-structured audio-taped interviews lasting approximately one hour each. A brief telephone screening occurred when the women phoned in to the office to indicate their interest in participating in the research study (Appendix B). To meet the goals of the study, initial exclusion criteria included women who were pregnant or had a child under the age of one as well as women who have suffered or are presently suffering from a serious medical condition or an eating disorder. These women were excluded as it was felt that these conditions might have significant influence on one's body image. A further question was added to the screening asking about the presence of any disabilities and how they influenced the women's body image. Three women were excluded from the study based upon these screening criteria. They were given the reason for the exclusion, thanked for their interest in the research project, and asked if they would like to have their name added to a list for future research initiatives.

The importance of confidentiality and the planned use of a tape recorder were discussed with each participant at the time of the initial telephone contact. Interview times and places were set up at the convenience of the women. It is important to allow women some control over the choice of interview time and setting (Morse &

Field, 1995). Women chose to be interviewed at their work place, their home, or a public place such as a coffee shop. Privacy and convenience were considered in the choice of meeting place.

Data Collection

Semi-structured interviews were used to explore the issues related to body image and socio-environmental influences for the phenomena being studied. The semi-structured interviews allowed participants to express themselves and to put emphasis where they feel it should be (Hagan, 1986). Open non-restrictive questions encouraged description and elaboration (Patton, 1990).

The participant was free to respond and illustrate concepts in her own way. The interviewers also used probing to encourage rich, descriptive data. Probes are requests for more explanation, more clarification, or more description (Glesne, 1998). The respondents described incidents and gave examples thus providing the rich, descriptive context that is so important for a qualitative approach. These rich data are necessary for grounded theory studies. Rich data allowed the researchers a thorough understanding of the "real world" of the informants and the data is grounded in women's experiences.

Ethical Considerations

The University of Alberta, Faculty of Agriculture, Forestry and Home Economics Ethics Review Committee gave ethical approval in November 1998 for the research project. An informed consent was obtained from all research participants in the research project (Appendix C). The informed consent provided an explanation for the project and a written verification that the participant agreed to participate

knowing the full details of the project (Fontana & Frey, 1994, Morse & Field, 1995). The consent was read aloud and the women invited to ask any questions or to clarify any points. The consents were signed and dated before the interview began.

Participation was voluntary and the participant was free to withdraw at any time. Names and phone numbers of researchers were left with all research participants. Researchers considered the participant's comfort and privacy throughout the interview process. The phone number of the Eating Disorder Education Association was given to all participants such that they could obtain professional advice and support following the interview if needed.

Confidentiality was ensured by assigning a code to each woman and by using pseudonyms to identify women when reporting study findings. Any information that might identify a participant was modified during the editing process. Tapes were erased following transcription and editing. One woman requested to not have a portion of the interview taped. That request was honored. All tapes and written records were kept in a locked office throughout the research study.

Interview Guide

Each of the women in the research project was interviewed twice by one of three researchers from the team using the semi-structured interview guide (Appendix D). The interview guide gave direction to the researchers to ensure that all topics were covered. The interview guide was pilot tested for content and length by each researcher with one research participant. Research team members shared their impressions of the interview guide based on the pilot test and minor changes to the questions were made. Literature on the technique of qualitative interviewing was

reviewed prior to the start of the data collection by the author (Fontana & Frey, 1994; Glesne, 1998; Patton, 1990; Rubin & Rubin, 1995). With reflection on the part of the author and ongoing discussion and collaboration with the research team, the author was able to critically examine personal interviewing techniques and make improvements as needed with subsequent interviews.

The questions on the interview guide explored the following themes: 1) body image (perceived weight, desire to lose or gain weight, body image satisfaction, development of current body image, life events that have altered body image); 2) lifestyle habits (dietary habits, exercise patterns); 3) personal feelings of self-determination versus public self-consciousness with respect to nutrition behaviors and body image; 4) health; 5) perceived norms for weight according to social roles and age; and 6) role of the media and culture at large in shaping body image. These questions were based on major themes identified in the literature as well as the personal experiences of the researchers as women and health professionals.

Specific questions around body image and physical activity were included in the interview guide. They were: How has the way you feel towards your body influenced your physical activity/exercise? How have these feelings changed over the years? Probes included: When did you start noticing changes in your physical activity/exercise? How do you feel about these changes? The women were encouraged to share their stories and their experiences with body image and physical activity.

There was minimal focus on the interplay between body image and physical activity within the initial interview guide. However, through data collection and

analysis, the emerging theory guided the need to further explore these important phenomena. Additional probing and questioning encouraged women to describe their experiences related to body image and physical activity more fully. As well, by using an interview guide that was broad in nature, women spoke about their experiences with body image and physical activity throughout the two interviews. This was advantageous to the overall study in the women's rich descriptive stories added to the understanding of the interplay between body image and physical activity.

Interview Process

Two semi-structured interviews were conducted with each woman with a usual spacing of two weeks between interviews. Three researchers collected the data over a period of 12 months of research from June 1999 to June 2000 (n=47). The author conducted 8 of the midlife women's interviews (n=24) as well as interviews with younger women. Individual interviews lasted 60 to 90 minutes. Each participant gave permission to record the interview prior to the start of the interview. An external microphone was attached to the participant. There was little noted discomfort with the use of audio-taping or the microphone. The women quickly seemed to forget about the recording as the interview progressed.

The researchers carried back up tapes and extra batteries to all interviews. Notes were taken during the interview to provide backup information in case of audio-taping difficulty. There were no instances of audio-taping difficulty. All of the interviews were confirmed a day or two before the scheduled date. An answering machine was available for last minute changes in plans. Only two women forgot the

interview time and did not show up. The interviews were rescheduled for another time.

The comfort of the women participants was considered at all times during the interview process. Tissues were available if needed. Time was spent getting to know the participant. The building of rapport and trust was important. The interview was started with an initial question to build comfort (Hagan, 1996; Sword, 1999). The first question was related to the roles that were important to them as a woman. They shared stories about their wife, girlfriend, or single role, their mothering role, their sister role, their friend role, their work role, and their volunteer role. Many of them talked freely about their present and past experiences of being a woman.

The initial interviews were more structured with specific questions being asked. As the researchers became more comfortable and familiar with the interview process the interview guide was used only to ensure that all questions had been addressed in the interview. Open discussion was encouraged and the women often introduced topics on their own. It is felt by all the researchers that the research participants had shared openly and honestly during the interview process. The women shared intimate details about their lives and their experiences with body image over time.

Simultaneous involvement in data collection and analysis allowed for the analysis to shape the data collection in both the large project as well as the author's research. More data were collected around the emerging themes. Topics were followed up on and expanded on. The interview guide was adapted to add further areas to explore and to delete questions that had not been fruitful. The use of multiple

interviewers allowed for a rich, broad picture of the lived experiences of the women participants.

With multiple interviewers, there was a need to ensure consistency of approach as much as possible. Researchers met weekly to share their interviewing experiences and to offer support. The ongoing discussions between the researchers about the interview questions and the emerging theory allowed for the changing of questions to better meet the needs of the study consistent with a grounded theory approach (Charmaz, 1995).

Analysis

Each interviewer recorded detailed field notes following data collection. The field notes included written comments about the environment of the interview, the quality of the interview, methodological observations, analytical observations, and any other relevant comments. The first two or three interviews were transcribed verbatim initially by each researcher. A typist was hired to continue with the transcription. Careful direction given to the typist in regards to the importance of including exact words of participants as well as pauses and tone of voice. The researchers then edited all interview transcriptions to check for accuracy. Diary writing and researcher observations were also included in the data. Transcribed interviews were managed with the assistance of NVivo, a computer software program for assisting the analysis of qualitative data.

The analytic process was based on immersion in the data and repeated sorting and coding while making comparisons that characterize the grounded theory approach (Creswell, 1998). An example of codes used for physical activity is included in

Appendix E. First level coding (open coding) occurred with descriptive code names being applied to each concept within the data (Morse & Field, 1995). One incident often had more than one descriptive code to provide for full theoretical coverage and to allow the developing theory to fit the data.

Each researcher used memos to record ideas, insights, thoughts, and feelings about the relationships of the emerging theory. These memos encourage the identification of themes and patterns in the data and the noting of similarities in the data such that theories and concepts are developed (Morse & Field, 1995). Second level coding (selective coding) occurred as the first level codes are categorized, recategorized, and condensed as new data were added (Morse & Field, 1995). Categorizing moved the coding process to a higher level of abstraction. The categories were clarified and developed as data were examined and compared (Charmaz, 1995). Relationships and patterns between the categories were identified. The theory gradually became more streamlined.

Researchers used the principles of grounded theory and comparative analysis as they collaborated in the data analysis process. Recurring themes and contradictory data were examined to allow for interweaving between the data and the emerging theory. The researchers met weekly as they were simultaneously engaged in the data collection and the analysis in the aim of developing theory. Codes were developed collectively at team meetings and then individual team members coded the content of each transcribed interview for manipulation using the NVivo software. There was frequent opportunity for collaboration and clarification among team members.

The discussions and debates among team members added to the development of a shared theoretical analysis for the large study around the importance of body image for women. The author then worked independently on the theoretical analysis of midlife women's experience with body image and physical activity. However, continued discussion and peer debriefing with the author ensured that meanings were clarified and communicated in an understandable way.

Researcher as the Research Tool

In qualitative research the researcher is the primary instrument of data collection (Morse & Field, 1995). It is important to acknowledge the position and background of the researcher such that potential bias and preconceived ideas about the phenomenon under study can be clarified. As the researcher and author, I reflected on why I was interested in this topic of body image and physical activity. I made use of a journal to reflect on my own past and present experiences with body image and related behaviors. Reflection on the influence of self creates personal awareness of how the research is shaped by one's life experience (Sword, 1999). Patton (1990) suggests that the credibility of qualitative research is dependent on the credibility of the researcher within the data collection and analysis phase.

I am a midlife woman whose roles include that of being a wife, mother, daughter, sister, friend, and researcher. I am also a nurse. I initially chose to share with the research participants my background in nursing in the hope that they then might be more comfortable sharing their life stories. However, I found that some of the women I was interviewing were looking for confirmation as to the correct answers to questions. This need for social acceptability and looking for the correct

response can influence the participants response (Hagan, 1996). After the first few interviews, I began introducing myself as a student in Health Promotion to shift the focus onto the research objectives rather than on participants' health related concerns. I avoided sharing my personal feelings and perspective about the topic. I was aware of potential power inequities in the interview relationship and encouraged open, honest responses from the participants. I positioned myself as a learner interested in the participants' experience and knowledge of the topic. The women appeared eager to share their stories and have their voices heard.

As a nurse, I was also aware of avoiding counseling techniques such as reflection and summarizing in the interview (Morse & Field, 1995). This took practice and some reflection following the review of the early transcripts. I worked to guide the direction of the interview by using probing and encouragement. Confirmation and summarization were left to the end of the interview. I was aware of the need to avoid influencing the respondents' stories in any way.

As a midlife woman, I personally have experienced slight fluctuations in body image satisfaction dependent on the context of the situation. I am more aware of my own personal response to socio-environmental influences and external messages about body image. I understand better the complex relationships between physical activity and body image for many women. I have worked at allowing the data to identify the key concepts and linkages (Morse & Field, 1995). I purposefully began the research project having done very little reading of the literature in the field. I entered the research with a focus but also worked to remain open and sensitive to data that would lead to theory development (Morse & Field, 1995). As well, I remained

cognizant of the fact that my professional background and my personal experiences were influences on my interpretation of the data (Sword, 1999). .

Trustworthiness

Trustworthiness of inquiry considers truth value, applicability, consistency, and neutrality in the research process (Lincoln & Guba, 1984). Several activities were employed to ensure trustworthiness of the research inquiry. If intellectual inquiry is to have an impact on knowledge, it must be credible, must communicate in an understandable way, and be able to be checked for the process with which the findings were obtained (Erlandson, Harris, Skipper, & Allen, 1993).

Credibility is increased with prolonged engagement in the field, with observations to improve depth of inquiry, and triangulation to verify and clarify findings (Lincoln & Guba, 1984). The decision to conduct two interviews with each respondent with a spacing of several weeks allowed for the development of trust and rapport and also allowed for perceptions and observations to be checked with each respondent to ensure understanding and accuracy in an informal member check. A summary timeline at the end of the second interview also allowed for an opportunity to check back with respondents and decrease the chance of researcher bias and misunderstanding. Twelve months in the field using comparative analysis allowed for ongoing reflection over what was most salient to the study and relevant to the purpose of the study. The use of constant comparisons and questioning helped to avoid data contamination and resulted in increased theoretical sensitivity by researchers (Morse & Field, 1995). Further interviews were used to clarify perceptions and to "ground" the data.

Triangulation in the use of multiple researchers in the data collection and analysis phase added to the credibility of the findings (Nutbeam, 1998). Frequent researcher team meetings allowed for interpretations to be checked to reveal and manage superficial or biased researcher views. The debates among team members allowed for an increased understanding of individual researcher bias. Peer debriefing was utilized as a means of exploring aspects of the inquiry where meanings were described and interpretations clarified. Transcripts were examined for any leading questions and to ensure that there was neutrality in the manner that the questions were being asked. The use of multiple interviewers was advantageous as it allowed for a broader and richer picture of the lived experiences of the women being interviewed (Morse & Field, 1995). Frequent dialogue and attention to detail allowed for further checks to ensure accuracy. The primary disadvantage of the team approach resulted from the difficulty experienced in coordinating busy schedules and ensuring that team meetings could meet regularly. By all team members remaining flexible and open, the team was able to work within their personal time constraints.

Rich descriptive data added to a complete picture of the context of the women's experience with body image and physical activity. Credibility in a grounded theory study is increased through the use of a codified procedure for analyzing the data (Glaser & Strauss, 1967). The coding was based on women's experiences as described in the data. The potential bias of the coding scheme was frequently reviewed to determine validity and reliability. Explicit, detailed notes that demonstrate the development of the theory from the indicators in the data were kept in an audit trail. The use of the reflective journal encouraged the author to consider

information about the human instrument as well as information about the methodological decisions and the reasons for them. In grounded theory research, the researcher is immersed in the social world of the respondents thus allowing one to experience and to think theoretically about what has been seen (Glaser & Strauss, 1967).

Chapter 4

Findings

The 24 midlife women that participated in this research study were a heterogeneous group (refer to appendix F for a profile of the women). The women varied in terms of their present roles, relationships, and background experiences. Participants' educational levels varied from high school to post secondary degrees from universities. The women included schoolteachers, offices support workers, managers, nurses, physicians, social workers, artists and a seamstress. Three of the women were retired, two were at home, and many were involved in volunteer work outside the home. One of the women was unemployed and looking for work. At the time of the interviews, twelve of the women were married, seven were separated or divorced, two were widowed, and three were single. Two of the women were on medication for depression.

Nine of the midlife women felt dissatisfied with their body at the present time while nine of the women currently felt satisfied with their body. Six of the midlife women were unsure about their feelings about their bodies in that they shared conflicting messages. Many of the women shared that their body image fluctuated from day to day depending on the context of their life situation. The women shared their feelings as to the importance of their body image and their appearance. Their stories reflected many changes in their body image over time.

The women had varying degrees of physical activity, with only three of the women sharing that they were currently inactive while twenty-one of the women shared that they participated in some kind of activity. These activities included golf,

yoga, weight lifting, dancing, biking, walking, hiking, aerobics, and running. The researchers made no attempt to define or quantify "physical activity", but allowed the women to self-define through their own words and descriptions. The words midlife women used as they talked about their physical activity included "being active", "being fit", and "exercising." The words used to describe physical activity by these women were the same words that were then used in the findings. Some of the women shared feelings of low motivation, feeling too tired to exercise, and feeling betrayed that their regular exercise had not resulted in any weight loss. Other women shared more positive feelings of enjoying being active and that physical activity was important to them.

For the women participating in this study, the interrelationship between body image and physical activity was dynamic. The women spoke of their body image changing according to the context of their daily lives. The significance that physical activity played is related to midlife women's reasons for being active, the triggers and life events that influenced activity, the benefits from being active, the barriers to exercise, and the importance of physical activity to these women. An understanding of the interplay between body image and physical activity adds to the overall picture of how these midlife women view themselves within their changing world.

Six main themes around the significance of physical activity to the lives of the midlife women emerged from the data. These six themes were: physical activity to decrease body size, physical activity to mold and shape the body, physical activity for fitness, physical activity for health, physical activity for fun, and physical activity integrated with self. Two other groups of women were identified separately as they

presented different experiences than the other women who spoke of a primary significance of physical activity. One group of women shared that they were experiencing a changing significance of physical activity and in an active process of transition. The other group of midlife women shared that they were currently inactive. All of these midlife women shared stories that reflected the significance of physical activity in their life as well as the complex interplay between physical activity and body image over time.

The women whose quotes were used to illustrate each major theme reflected the primary or most important significance of physical activity in their life experience. However, many of the midlife women spoke of more than one significance or meaning of physical activity. For example, one woman who exercised as a way to decrease body size also spoke of enjoying being active. Another woman for whom physical activity was integrated with her sense of self also spoke of physical activity for weight control. In fact, most of the midlife women spoke of the significance of physical activity for weight control in their experience. For all of the women, their stories reflected a complex interrelated layering of the significance of physical activity in their personal experience.

For the purpose of analysis, the primary or most important significance of physical activity for each woman was identified. This selection of the primary significance was based on understanding each woman within her day to day experiences of physical activity and body image. This was not an easy process. There were frequent returns to the interviews to keep the analysis grounded in the

data. At all times, the context of each woman's situation was considered within the complex interplay between body image and physical activity.

The following text allowed the participants to speak for themselves and tell their stories of their experiences with body image and physical activity. The midlife women who shared rich and detailed accounts of their experiences are described in more detail within the chapter. The women who spoke very little about the significance of physical activity and the interplay with body image are included at the end of each main theme. Actual names of all the women participants have been changed to pseudonyms for the purpose of anonymity.

Physical Activity to Decrease Body Size

Two of the midlife women spoke primarily of physical activity being significant as a way to decrease their body size and to improve their appearance. Theresa and Wendy shared detailed stories about their feelings of having to exercise and be active as a way to lose weight. There was a sense of wanting to be in control of their bodies. There were feelings of being dissatisfied with their bodies and feelings of frustration when they saw their exercise program not giving them the results for which they had hoped. They had not been successful in reducing their body weight.

Theresa was a 58-year-old single woman who worked as a seamstress. She spoke of her feelings of being dissatisfied with her body as she felt she weighed too much. She was upset with a 50-pound weight gain with menopause. She was frustrated that a regular exercise program had not resulted in an anticipated weight

loss. She was exercising four times a week doing aerobics, weights, and more recently Tae Bo.

Wendy was a 57-year-old woman who was in a common-law relationship and worked in human resources. She shared that she had gained weight 20 – 30 pounds with menopause and that she was "not thrilled" with her body. She was active with aquasize, cross-country skiing, weight lifting and walking. Wendy initiated her exercise program at age 50 as a way to deal with "the weight going up."

Body image.

Both Theresa and Wendy shared that they were not satisfied with their bodies at the present time. Theresa talked about how she was "very disappointed in herself" when asked to describe herself. When asked how she feels about her body in general, Theresa replied:

> Oh boy, here we go …no, this body is a body to exercise, watch what I eat, anybody who do what I did would have been slim, but I hit menopause at 51, and brother, my body went to hell in a handbasket, it just suddenly exploded on me and I was still exercising …I drink my water, skim milk, lots of salads, it didn't work for me.

Theresa shared that she had been happy with her body before menopause, she felt that she "had big thighs but a waist of 26 inches." The trigger for Theresa in terms of feeling negatively about her body was menopause: "I went through the change of life and it was downhill after that." She tried taking hormone replacement for a short time, but felt that the hormones contributed to her weight gain and so stopped taking them.

Wendy shared similar experiences of a weight gain with menopause. She explained, "and then I seemed to get kind of into menopause and everything went for a dump." After sharing that she was "not thrilled" with her body, Wendy gave further explanation. She said that she was "not terribly unhappy ... you know, I'm not disgusted with it, but I could be disgusted looking in the mirror, terribly disgusted." Even though Wendy was feeling some degree of dissatisfaction with her body, she was able to describe herself in more positive terms than Theresa had. Her description of self included the words "lots of fun, humorous, dependable, loyal, and caring."

Physical activity.

Theresa exercised as a way to achieve her desired weight loss and a slimmer body. She initiated her present exercise program "cause I was really big and all that ... I used to do the step and lift weights, you know, just normal aerobics, and I started doing Tae Bo." She shared that she had "always liked exercise" and that in her teenage years had played hockey and netball. She talked about having to find other ways to exercise, as she no longer played these sports. At present, she stated that she was not exercising because of a pain in her side.

Theresa felt that she was doing everything she could to try and lose the extra weight and so must be doing something wrong. Her frustration is evident as she shared, "I have been doing everything to keep it off ... and it is going the opposite way." She went to a dietitian but felt that she was of no help. She also visited her physician with concerns of weight gain despite her attempts at maintaining a healthy diet and regular exercise. She said that the doctor tried to reassure her. Her response was:

> But I don't think I should have to accept the fact when I'm doing everything to get rid of it, and, so I must be doing something wrong, and I wish somebody would tell me what that is... when I see all this dimply fat on my thighs, it's frustrating.

Wendy talked less about the significance of physical activity than did Theresa. However, she also shared some common feelings with Theresa. She stated that her exercise program had not resulted in a decrease in body size. She found that weight loss with exercise was easier when she was younger. Now she finds that she was "exercising more than ever but has never weighed more" and shares that "yeah, not having results is really, really frustrating."

Interplay between the two phenomena.

Weight and appearance appeared to be very important to Theresa. When asked how an additional weight gain of 20 pounds might affect her life she responded, "Oh god, oh please, don't say that, don't say that... then I would go crazy because I would still like to know why." Theresa was looking for reasons for the weight gain and solutions to deal with the excess weight.

Theresa's negative feelings about her body were influencing her life in many ways. She expressed disappointment in herself and shared that she did not want to sew any clothes for herself because she did not want to have to measure herself. She exercised at home in her living room so that she could avoid "having to wear all those fancy clothes." She said she felt like a "recluse" and that she was "very disappointed" in herself. Theresa felt social pressure to be thin. She explained, "society fools everybody, society wants everybody to be Slenderella."

Wendy talked about conflicting feelings about her body in not being "terribly unhappy" while being "terribly disgusted." She shared that she was working towards being more accepting of her body size. She told the story of how her physician reminded her to think about her mother's appearance, and that she would probably look the same as her mother as she aged. Her physician also encouraged her to remain active and then to "not worry" about the increased weight. At a later point in the interview, Wendy shared that she worried that other people are thinking, "how could you let yourself go like that?" and that "really bugs me ... because I knew what I was doing." Although Wendy may be more accepting of her weight gain with menopause than is Theresa, she still felt that others may be critical of her lifestyle choices without realizing the attempts she is making to be healthy.

Presently both of these women are motivated to exercise as a way to control their body size. Their frustrations of weight gain with menopause and little effect from exercise are evident. Theresa stated she does not want to accept this new weight. Her lack of success with her exercise program is adding to her feelings of disappointment in herself. Her feelings about her body are impacting on many aspects of her life. She has internalized social pressure to be thin as evident in her talk about what others must be thinking of her. She is looking for external answers to help her achieve her goal of a desired weight loss.

Body size seemed to be less important to Wendy. Wendy was able to express some positive thoughts about herself as a person. Her feelings about her body did not seem to influence her feelings about herself as a person. However, like Theresa, she expressed negative feelings about her body and disappointment in that her exercise

program had not resulted in a decrease in her body size. It was not clear why these women continued to exercise despite their feelings of disappointment with their perceived lack of success.

Theresa and Wendy were not satisfied with their bodies and were involved in an exercise program primarily as a way to decrease their body size. Body aesthetics was important to both of these women. None of the midlife women who felt more positively about their bodies talked about exercise only in this way. Many of the other women shared that weight management was part of their motivation to exercise but that there were many other reasons to be active. For Theresa and Wendy, exercise as a way to control or alter weight left these two women with feelings of frustration and disappointment. Their negative body image and physical activity for weight control were closely linked and intertwined.

Physical Activity to Shape and Mold Body

Two of the midlife women talked in some detail about exercise as a way to control the shape of their bodies as well as a way to maintain or decrease body size. They had mixed feelings about their bodies, at times feeling positively but also sharing some areas of concern. They were concerned about body aesthetics. They talked about the importance of having rigid control over their exercise program and both shared that they were compulsive in nature.

Eugenia was a 44-year-old divorced woman who had four teenage boys. She worked as a physician. She gave mixed messages about feeling good about her body while also feeling too fat and not liking her hips. She was very active with being involved in organized exercise 4-6 times a week. She shared that she "has always

been active" and that being active is important for "maintaining my weight" as well as "toning my body."

Nadine was a 57-year-old woman who recently retired as a schoolteacher. She separated from her husband several years ago. She was exercising every day for a few hours since her retirement. She shared that she is presently "very happy" with her body. Nadine explained that her "body needed work" and that now she feels proud about "how toned this body is at this weight ... that's the difference I've seen." Both of these women were active as a way to manage their body size and shape.

Body image.

These two women differed in their degree of satisfaction with their bodies. Eugenia shared that she was very concerned about her body as a teenager and compared herself to others. She talked about being anorexic for a short period of time during her adolescence. Eugenia gave conflicting messages about her present feelings about her body. When asked about how she felt about her body in general, Eugenia stated that she has "a wonderful body" but that she feels that she is "too fat." She explained further, "I've got buns of steel. Um, but even now, I still, like I just, I can never get away from that feeling that God made a mistake and gave me the wrong hips." She followed this statement with a laugh. She went on to talk about how her hips were "too big" and the "wrong shape."

Nadine seemed to generally feel positively about her body at the present time. She shared that she was "feeling happy" about her body but that her "body also needed more work." She explained that she had been very thin as a teenager but gained weight through her adult years as a result of her body "being indulged" and

that her "cravings for sweet things are overriding" in her life. When asked how she felt about her body when she was heavier, she answered, "I never felt worse about my body, I just knew I gained weight ... I didn't fit my clothes." She felt that her body is "more toned" and that her "body needed work and it's been getting work ... it still needs some more work." She was able to be more accepting of her body now as she saw some positive results from her exercise program, she felt good about the "improvement."

Physical activity.

Both women spoke of "exercise" as being important for molding and shaping their bodies. Eugenia shared that she has always been active in the past and was involved with gymnastics in high school and aerobics just after she had her first baby. She described a variety of reasons for wanting to be active at the present time. She talked about her increased muscle and her changed shape as resulting from her exercise. She has noticed that she is "more dimply" and had "more cellulite" with aging. She dealt with these changes, "I've learned how to tone up my body. Like, I'm far more knowledgeable now about which exercises work." She was pleased that her "rear end actually has a perkier shape" than it did when she was younger. She also shared that she exercised to "maintain my weight, I don't, I know that I am not going to lose weight. I am going to get more muscular, maybe but I'm not going to lose pounds."

Unlike Eugenia, as a teenager, Nadine was not interested in sports and did not participate in any organized physical activity. She spoke of her present exercise program as being "a victory." She thought that she was "dying" in the first few

weeks of her walking program but now "it's getting much better now ... I can go further and do more." Friends have suggested that she should not walk so far, and she replied, "you can never walk far enough." She is feeling very committed to her exercise program.

Nadine shared that she knew she "needed to get the exercise going" because she "wanted to see success with toning." She explained further, "I knew that (toning) would happen with my legs, I just knew it would, from what I've read." As she talked about her struggles with maintaining her weight, she shared, "so the toning has been the motivation to say 'look where you can go'." She also felt that exercise is one way she can achieve weight loss. As she talked about reaching "a weight that is good for me" she explained, "I can't do that without exercise. And the difference now, when I watched what I was eating, was, I didn't exercise. Now I am. And the exercise is, um, it's a pleasure."

Both women spoke of the need for tight control over their exercise program. Eugenia described herself as a "perfectionist" and "fanatical" about her physical condition. She explained, "I won't let myself ... get old or get fat, or, um, I'm just not ready to get old yet." She makes time for her exercise out of a very busy schedule, and admitted "I guess I take it away from my kids, because it is after work." Nadine also described herself as "obsessive/compulsive" in her exercise, "because that's probably what my nature is." She was very committed with her exercise program and explained, "I'm gonna do 'er and I'm going to finish it, and I'm going to do it well."

Interplay between the two phenomena.

Body image was very important to Eugenia at this time. She described conflicting messages about liking her body while also feeling too fat. She talked about not going swimming "because I don't want to be seen in a bathing suit" and being very careful in her choice of exercise clothing such that her hips are hidden. She shared that she had consulted a plastic surgeon about the possibility of using liposuction to reshape her hips. She had the impression that he felt that she was obese because he said she had about one inch of fat on her hips. However, he said she was not an ideal candidate for the surgery since she was over the age of 35. When asked whether she questioned his opinion, she said, "well no, I, I, like I know that's where I put my fat."

Body size and shape were also important to Nadine. She talked about wanting to become active because her clothes did not fit well. She also shared that her exercise goal was to get into a small piece of intimate clothing that she showed to the interviewer, as she explained, "I'll show you my goal (laughter) and I'm going to get there, I will get there."

Nadine did not feel that she could be healthy at her present weight. She felt that she needed to keep working on her exercise program. She did feel positively about "working on what I don't like." With an imagined weight gain of 50 pounds, she replied, "I'd do something about it." It was important to her to reach her goal of altered body size and shape. When asked how she might handle the possibility of not reaching her goal, she said, "Oh no, no, no. Don't worry, I know I will. I'll have to work at that, I'll really have to work at that."

Eugenia reinforced that body appearance was very important to her in her response to the question of how a weight gain might affect her life. She replied that she would need to purchase a new wardrobe and that she would wear skirts everywhere, "they hide better." She wondered if with a weight gain of 50 pounds she might give up trying to maintain and control her body size and shape: "I might just throw in the towel and just gain another 25 pounds. Just stop caring, or stop trying. I think you'd, I would always care, but just give up trying to keep it down at all."

Being physically active was very important to both of these women. Eugenia shared that she "felt really good about the way that I move, and, um, just sort of being integrated spiritually, and physically, and mentally." She felt good about her physical condition and shared that she was "in the 99th percentile for cardiovascular fitness." She compared herself to others, "it's just fun to see how good you are compared with everybody else." Nadine also shared positive thoughts and feelings about her present exercise program. Both Eugenia and Nadine were highly committed to their present exercise program and saw it as very important to them at this point in their life.

Hannah, a 47 year old widowed woman, also talked briefly about the importance of her exercise program for weight control and toning. She differed from Eugenia and Nadine in that she was presently feeling less positively about her body than she had at an earlier age. She was concerned about changes that she had experienced with aging. She noticed the occurrence of cellulite in her early 40's and was disappointed when it did not go away with exercise. She shared that her "cellulite bothers me a lot." She shared that she would "feel devastated" with a weight gain of 50 pounds and "would have to do something about it." Hannah, like

Eugenia, had considered plastic surgery as a way to deal with her cellulite. She had already had her "eyes done" and felt that the change in appearance was worth the money spent. She shared that being "well maintained" was important for her self-esteem and for how she thinks about herself.

Hannah exercised as a way to lose weight and as a way to tone her body, "so that your body is toned, not that flying in the breeze kind of thing ... I like to put on a bathing suit once in awhile, and walk confidently down the beach." Hannah also talked about other reasons for being active, such as stress relief, social contact, and to "feel better." Hannah did not talk about control through exercise in her interviews in the way Eugenia and Nadine did. There was very little context given in her interview around her personal experience with physical activity.

Hannah shared that she felt "bad" about her body when she was intimate with a man, "you know, in relationships, you're in the room and you've got a man there, and it's like, ahh ... I think about my cellulite. I am really self-conscious about it." Hannah also spoke about being influenced by the media. She explained:

> You can pick up any magazine, anywhere, and it's full of pictures of stunningly beautiful women and these aren't people that you meet on a daily basis. But everyone strives for that, you feel you have to be that.

Eugenia and Nadine both talked about being in control of their body through the exercise. Their sense of self seemed to depend on the maintenance of this tight control over their exercise program and their bodies. It was seen to be a fragile relationship. Eugenia had mixed feelings about her body and talked about her need for control over the signs of aging and possible weight gain. Nadine felt generally

good about her body and her exercise program as long as she was seeing the positive results that she wanted to see. They both had a very rigid program of physical activity to control their bodies.

All three of these women used an exercise program to work towards their desired body size and shape. They all talked about other benefits of exercise besides body sculpting. However, physical activity for them seemed to hold primary significance as a way to mold their body into a preferred size and shape. They differed from the women who exercised primarily to decrease their body size in that weight was not the only important part of the equation, body shape was also important.

Eugenia and Nadine were very rigid in their control over their exercise program. Hannah did not appear to have the same need for control. Appearance was very important to Eugenia and Hannah, and both relayed stories of social influences on their body image through health professionals and the media. Nadine shared that her major motivator to exercise was to fit into clothing. They experienced varying degrees of satisfaction with their body depending on their perceived success of the exercise program and the many intertwining influences on their body image and physical activity. All three of the women were concerned primarily about body aesthetics.

Physical Activity for Fitness

Two midlife women talked about the importance of physical activity for fitness. These women used the words "fit" and "strong" as they talked about physical activity. Jill and Emily spoke of their body "as a machine that needed to work" for

them. Flexibility and strength were important so that they could continue to be active. Both of the women talked about the effects of aging and the increasing need to stay "fit and strong."

Jill was a 45-year-old woman who was a swing dancer and instructor. She was in her third marriage and had two teenage sons from a previous marriage. She had a positive body image and felt that she was lucky to have been born with a slim body. Her weight had remained relatively stable since high school. She shared, "I'm happy with my weight, I keep within the range of 5 – 10 pounds since high school … no planning on my part, I think it's probably just my genes." She remained active through her dancing and strength building exercises.

Emily was a 46-year-old woman who worked as a nurse consultant. She divorced 10 years ago and was presently a single mother of 3 teenage children. She shared that she presently does not like her body and that she would like to be more physically fit. She was walking on a regular basis.

Body image.

Jill had a positive body image. She explained, "I have been lucky in not having to watch my weight, and you know, being fit and what not. I may not have really had or allowed the influence of other people's opinions, um, to affect me." She felt that she had "always been kind of average." She talked further about media influences and felt that there is a "change in the trends, from a "need to be gorgeous and beautiful" to the message "you can be beautiful, no matter what … you can be bold, beautiful, and big."

Emily shared that she doesn't like her body at the present time as she has put on weight since going back to university. She explained, "I put on more weight that I have probably in my entire life, and I do feel uncomfortable." She went on to say, "right now, I feel overweight. I've learned that, you know, I have to live with the fact that I'm not tall, I'm not blond, I'm not thin, I never will be ... but I would like to more physically fit." She talked about recognizing how easy it was to put on weight with menopause and that it is important to her to feel comfortable in her clothes and to "look fit ... and to feel fit."

Physical activity.

Both women spoke of the importance of physical activity as a way to stay fit and strong. Jill was not involved in organized sports in her younger years but talked about swimming and walking with her children. She began dancing in her late 30's after meeting her current husband. She shared, "that's when I started to work on my, my physical being, as such."

Strength and flexibility were important to her as a dancer. When asked what she would like to change about her body, she replied with a laugh, "I would like to be able to do the splits ... I would like to be far more flexible than I am." She worked on strengthening exercises and stretching exercises as well as the dancing. She shared, "I really needed to be strong" for competition and for teaching dance.

With aging, Jill noticed some changes in her body with an increase in the number of "aches and pains." She felt that she will "get out of shape quicker" if not working on strengthening or stretching. She explained, "I need to work even harder at maintaining tone in my muscles ... my tummy muscles are really not exercised as

much as the rest of my body with the dancing, so I need to do other things." Maintaining her level of fitness was of key importance to Jill.

Emily felt that she was "not athletic at all", but she shared that she liked to walk. She walked every day for about 40 minutes. She explained that when her children were younger, she used to take them out in the stroller, or for bike rides. As her children grew older, she had "increased her awareness of how one should be a little more physically active." Walking helped to keep her fit as well as increased her energy level. She enjoyed the social interaction of yoga in the past, "because of the opportunity to go out and do that ... it was fun, we used to laugh."

Emily talked about aging: "my body is sort of, things are slowing down, you're not able to do things that you were." She felt that if you take care of yourself, then you can still "maintain some of those activities." She felt good that "my body works, that it, you know, I mean I haven't had any, um, any injuries or disabilities, and you know, the fact that I can still walk and enjoy things that I, you know, so it's a, a potent machine." She talked about her role as a single mother and the importance of staying fit. She explained, "I've had to do a lot of stuff and get through a lot of stuff ... need to have some level of fitness to be able to do the things that I need to do." Physical activity was important to both of these women so that their bodies would work for them.

Interplay between the two phenomena.

Body appearance did not seem to be very important to Jill personally nor did it seem to influence her perception of others. She talked about her love of dance and her involvement with competition. She spoke of dancers who were heavy: "I have

seen large dancers who are phenomenal in their movement." One's outer appearance was less important to Jill, and she shared, "I see more what's coming from inside out."

Jill shared that she "loves to be active" and her main concern with an imagined weight gain of 20 pounds was that it would affect her dancing, "just the type of moves I could do ... although it's amazing what people can do no matter how much they weigh.". With an imagined increase of 50 pounds, she shared, "I would definitely stop doing flips ... it would have to happen very quickly ... and I would probably attack it right away." She went on to say:

> It is very difficult to imagine, but my whole lifestyle would change, I'd be prepared to retire from dance, which I don't really mind thinking about, I am looking forward to the day when I don't have to travel as much and my husband and I can just kind of boogie on out by ourselves.

Emily shared her thoughts and feelings about her body: "For all of my life, my body has not been a consuming issue for me. I've looked at it as I'm glad to be healthy and, you know, I would like to be attractive, but you know, you have to be reasonable about it." She talked about how she relied more on her "inner strengths to get me the things that I've needed." It has been important to her to look "well groomed" but "appearance hasn't been a driving influence in my life."

Emily also talked about how a weight gain of 20 pounds might affect her life. She shared that "it would be very discouraging, not only because you realize how unhealthy that is, but it's uncomfortable." She continued with explaining that "if it

was really related to lifestyle, I'd make a concerted effort to address whatever those lifestyle issues were."

Both Jill and Emily spoke of the importance of being physically active for reasons of fitness. They were able to imagine an increase in body weight without an immediate reaction of being very upset. Aesthetics did not motivate their physical activity. Physical activity did seem to have a positive impact on body image, but this influence was more related to fitness and strength than aesthetics. Jill talked about how she loves to be active. Both of these women made a conscious decision to be physically active because it was important to them.

Physical Activity for Health

Only one midlife woman, Deanna, talked in detail about the significance of physical activity as being "important for health." Deanna used the word "health" when she talked about her physical activity. She did not talk about needing to be physically active as a way to stay fit, or to improve on her flexibility or strength. She spoke more holistically about the significance of physical activity in the context of her experience. Being both mentally and physically healthy was of key importance to Deanna.

Deanna was a 55-year-old woman who was currently working as a nurse. She was married and the mother of 3 adopted children. She kept herself active with walking and golf and stated that she valued activity as a way to stay healthy as she aged. She also expressed positive feelings about her body. When asked how she felt about her body in general, she answered: "I'm excited about it right now, because I just turned 55. And I am in far better shape and health than I was at 40. That's been

a conscious decision ... I've done so much reading ... on health and research and the aging process."

Body image.

Deanna described herself as a person who is "really very comfortable with myself, very positive and up-beat," and a person who "loves life ... I like to be doing things, and be involved." After expressing her feelings about being "excited" about her body, she explained further that she felt "really good" about her present weight, and that she had just lost 8 pounds over the last 3 months. She explained that she had been "a little more conscious on the diet ... and really, um, faithful to the exercise." At the same time, she explained that she had "no desire to be the size 8 kind of look ... if it happened, it happened ... if it didn't, it didn't."

Physical activity.

Deanna was active as a way to stay healthy. Deanna talked about her level of commitment to her present exercise program of daily walking and weight lifting that she initiated at age 50. She shared, "I have to keep myself healthy ... the more I have read and such ... I have become more exercise oriented." She spoke of her need to be healthy so that she can care for a son who suffers from a mental illness and a husband who is blind. She explained her situation in this way: "I don't know what the future holds, you know, in that regard ... so I feel an obligation as a wife and mother ... because the better I am, the better support and helper I am to them." She also started lifting weights "to improve on my upper body strength ... and for bone density." Health was of primary importance to Deanna.

Interplay between the two phenomena.

Deanna shared that body size and weight is not terribly important to her at this stage in her life. When asked how a weight gain of 50 pounds might affect her life, Deanna replied, "it would probably not be best, for growing old and being, you know, the health piece." Deanna shared further thoughts on aging. She said: "we make choices, and I'm determined that growing old is going to be fun and it doesn't have to be a downer." The importance of remaining active is reflected in Deanna's following quote: "I don't want to be in a chair somewhere, doing nothing. That's a choice I can make. And I believe people make choices to let themselves be nothing, or to keep themselves going."

Deanna was very disciplined in her exercise program. She felt that her weight was under her control. She talked about feeling concerned and annoyed with a previous weight gain. But she explained, "I wasn't obsessed with it. I knew I could do it. You know what you've got to do to get rid of it. I knew why I put it on. I knew what I was eating, that did it." With the imagined weight gain of 50 pounds, she replied, "it wouldn't put me in a tailspin. If I gained 50 pounds tomorrow, I'd deal with it." Deanna talked about how she was able to maintain her weight with strict control. She explained that "my thing is to watch the signs. That's why I weigh myself all the time. Because when it starts going up, it's easier to catch at ten pounds than to ignore it at 50."

Deanna talked about societal expectations of women of her age. She shared that she had done a lot of reading and felt that the messages coming from magazines were for women to become healthier. She explained, "I think society is talking about

being healthy ... to make the aging process more acceptable, to feeling better, to remaining more active and independent."

Deanna also talked about how her physician encouraged her to maintain a healthy lifestyle. Deanna explained:

> My doctor tells me I'm in good shape for my age, yes ... I have exceptionally low blood pressure, which is a result of lifestyle. And, um, when I go for my annual medical, my doctor's pleased with me. And that makes me feel good because I think the health side of it is important ... and so far, touch wood, I don't have any health conditions due to lifestyle kind of problems.

Deanna felt positively about her body and was active for reasons related to health and weight control. She was highly committed to her present exercise program and saw it as being very important to her at this point in her life.

Lisa, another midlife woman, spoke briefly about the importance of physical activity for reasons of health and being "good for me." Lisa, a 52-year-old woman, was dealing with a recent breakup of her marriage of 31 years. She was presently looking for work. She shared that she had mixed feelings about her body. However, she had found that as she got older, she was less concerned with the size and shape of her body. When speaking about physical activity, she talked about the importance of the social aspect of exercising with others but that she presently cannot afford a gym membership until she finds a job. She is presently "walking every day ... I have a dog ... I walk every day for about 40 minutes, that's good for both of us." She did not talk about the significance of physical activity to her feelings about her body.

Lisa appeared to be much more relaxed about her need for physical activity than was Deanna.

Both women spoke of physical activity as being personally important for reasons of health. They made a conscious decision to be active. Deanna started her exercise program at age 50 while Lisa talked about being active through her married years. Both women seemed to enjoy being active. Although both women talked also about exercise for weight control, body size seemed to be of less importance than was health. The primary significance of physical activity for these two women was for reasons of health and that it was "good" for them. Deanna in particular, spoke of the support from media and health professionals in pursuing physical activity for health.

Physical Activity for Fun

Several midlife women spoke of physical activity as being personally important because they enjoyed being active. Two of these women described in detail the significance of physical activity for fun. They both expressed dissatisfaction with their bodies. Physical activity did not seem to influence their feelings about their body either negatively or positively. They were active for reasons other than weight control or maintenance. Being physically active was important to them because they enjoyed it.

Vicki was a 53-year-old woman who was an educated health professional as well as an accomplished musician and poet. She was a single woman who shared that she had never had an intimate relationship. She had struggled with obesity and feelings of "disgust" with her body since she was in her early teenage years. She shared that she was very self-conscious of her body and that she had received many

negative, anti-fat messages over the years. She talked about the activities of walking, yoga, swimming, skiing, white water canoeing, and kayaking. She also talked about enjoying her physical activity throughout her teenage and adult years despite her size.

Dina was a 56-year-old woman who was recently divorced. She has two adult children and was presently working in office administration. She was feeling less positively about her body since her divorce. She described herself as "fat and happy" prior to her marriage breakup. She had been very active in her married life and spoke of how she enjoyed various activities such as golf, skiing, bike riding, badminton, and curling. She also talked about her present level of activity as being minimal but that her "golfing time with her friends" was still fun.

Body image.

Vicki and Dina both expressed feelings of dissatisfaction with their body. When asked to describe herself, Vicki began by saying, "I'd prefer not to" but then went on to talk about her multiple roles with work, music, writing, and art. Later in the interview she added, "How do you describe yourself? If I was meeting a stranger in a hotel ... I'm going to be wearing the carnation in my buttonhole, is what I prefer to say."

Body shape is more important to Vicki than is body weight. "I don't care what the number is, it's really the shape and what it looks like." When asked if anything made her feel good about her body, she talked about her various body parts:

> ...peripheral limbs, not, not the central part of my body, which is where the problem is ... oh, and my hands... my arms are worse than my hands ... I'm

fairly dexterous, I suppose, in that, I play instruments … and I think probably my head is okay … (laughter) … that's about it.

As a teenager, Vicki remembered her mother being concerned about her weight and taking her to see her physician. She was given diet pills but does not remember her mother receiving any advice on how to prepare healthy meals. She was in her early teens when she first started to realize that "this is not a good thing. I was identified as overweight and you have to do something about it."

Dina also shared some negative feelings about her body. She described herself as a "middle-aged, ordinary looking, ah, slightly overweight woman." She went on to say that as a person she is "dependable, caring, and well liked." She shared that she would like to lose "about 20 pounds", and that she felt bad about her size and weight "when you put on your panty hose, and then you stand there, and you know, it all hangs over." She felt that she started to put on a little weight after the age of 45. At the same time, she shared that "I think there are a lot more important things than, you know, the way your body looks. I think it's, it's more important what inside, you know, how you treat people."

Physical activity.

Both women spoke of enjoying being active. Vicki shared "I walk when I can, I mean, I enjoy walking, so that's one of the things I do when I have the opportunity." She remembered how "I've always enjoyed sports since I was a kid" and found that she would make her own fun, "I wasn't team (sports) material, so I always rode a bike, I wandered, and hiked, I had lots of energy, I enjoyed those things."

Vicki also talked about being in "fairly good shape, cardiac wise" and having very good endurance. She worked with a personal trainer after a car accident, which left her with back and knee injuries. She especially enjoyed her contact with the trainer, as she felt it was "value free" and gave her "more confidence in my body." She shared that "the difference it made, I thought, my God, I, I could do that. I think the thing that it is doable is quite empowering."

Vicki remembered trying out for various teams in school "and I didn't get on those teams ... and the real, the real shame about, feeling very ashamed about being overweight, um, I mean, I associated the two." She did not quit doing sports. She took up swimming because "when I was in the water and I'm kind of hidden, you know, except for my head, then I'm okay."

Feeling ashamed about her body while being active continued through Vicki's adult years. She felt that she could be active, but "it's dealing with the social, with appearing in public to do it ... is an inhibition for me, sometimes." She spoke of exercise classes for heavier women:

> I really can't buy into ... that fat is beautiful movement ... it isn't. I dislike it in other women. If it works for other women, if it works, fine. But I'm too ashamed to do something ... it's not acceptable for me.

Vicki spoke of the difficulties she had in finding clothing that fit. Sports clothing create even more challenges: "and with sports clothing, forget it." As a result she felt that she was not able to enjoy the activities that other people do and that it gave a message to us all: "now, apparently fat people aren't supposed to engage in,

in activities." Despite the strong negative societal pressures Vicki experienced, she continued to be active.

Dina talked about how being physically active was important to her because it was enjoyable and provided her with social contact. When she was married, "we, you know, we went on cruises together, we went camping together, we went on ski trips together, we golfed together, like we did a lot of, couple things together." She talked about her current golfing and walking with the dog. She now tried to "lead a, a reasonably healthy life. I don't, I don't exercise, like go to the gym" and that she was active for the pleasure of the sport, "if I enjoy doing something, and I get a little exercise, then that's good."

Interplay between the two phenomena.

Body size continued to be very important to Vicki. When asked about an imagined weight gain of 50 pounds, Vicki responded, "I would be devastated ... I'd probably have suicidal feelings ... it's extreme panic if I gain a little bit, it's panic ... one of the perpetual feelings is that I, I can't control my body."

Vicki also shared how she had never had an intimate relationship with another person. When asked what influence men had on her body image, she answered:

> Well, certainly there's the social thing. I mean, you kind of watch men's behavior, ah, who they rubberneck at. It's not a fat woman ... you know, I would never be considered an attractive woman ... period.

Vicki went on to explain: " I have male friends, you know, but um ... I, I would be too ashamed. You know, it would be very difficult for me to be intimate. Again, because of, of the shame."

Body size appeared to be of less importance to Dina. Even though Dina shared conflicting thoughts about her body, she talked about how she was now more accepting of the way she looked: "I've sort of become used to my body over the years. I don't think, necessarily that, that beauty is all physical." She explained further:

> My body is, is what I'm housed in ... and I don't think that, that the shape of it, ah, in any way, changes me ... I am what I am, whether I'm, you know, a petite, ah, size 7, or, you know, ah, a size 20.

Dina talked about her marriage breakup as being a difficult time. She experienced challenges in that she questioned her perception of herself as an attractive woman. She explained the process she went through in the early stages of her marriage separation:

> Well, I think, I think if you're, if you're at a point in your life ... where you perceive that you're happy, and, and everything is good, then I don't think your body itself ... is anything that really concerns you. It's when you, have a loss of a relationship, that you kind of, I think you look at yourself more critically. At the time, you just try to search for reasons why things happen, and you kind of wonder if it was, you know, the way you looked, or something ... didn't quite measure up to, to the new younger woman.

Vicki's body image also varied according to the context of her personal experience at the time. Vicki talked about how being physically active influenced her feelings about her body. She shared that she felt good about her present level of physical fitness: "I actually think I'm in probably as good a shape as I've maybe ever

been, in terms of endurance and what I can do ... kinds of motions and types of activities ... and I love to do them." When asked if her present high level of fitness affected the way she felt about her body, she replied:

> I suppose it depends on what day and on what situation ... if I can be in a situation where there are very few people around, and not in a class situation. For example, yoga is difficult for me in the sense that there's mirrors there ... I'm aware ... I'm the biggest person there.

Vicki shared her frustration about the societal myths around physical activity and body size and shape. She became more aware of the expected connection between eating, body weight, and activity in her adult years. She felt that people seemed to believe that "you can do lose weight through diet and exercise ... and if I look at body types on, let's say, on the women on my mother's side, you could line us up and you'd see a similarity of where the fat's deposited." Vicki felt that people would look at her as an overweight woman and think:

> You're just lazy, because I was overweight ... well, obviously, you don't do any exercise or if you did, you wouldn't be overweight ... people don't believe you, and/or also maintain that you are lying. So being treated as a liar is not particularly pleasant.

Vicki felt very negatively about her body. She enjoyed being active and was proud of her present state of physical endurance with activities. She experienced many barriers to exercise as well as strong negative societal pressures that influenced her feelings about herself as an active woman. She was resilient in her ability to continue to be active despite these barriers and societal pressures.

Dina had mixed feelings about her body. She was not happy with the extra weight she had put on since age 45. She shared how her marriage breakup caused her to question her attractiveness as a woman and that she would have difficulty with having some other man, "critique my body, it scares me to death." At the same time, she talked about how she had become more accepting of her body over time and that her appearance was less important to her than "what's inside."

Both of these women were active because they enjoyed being active. They did not seem to feel that physical activity played a large role in weight control or body appearance for them. Vicki had learned at a very early age, that even with being physically active, she continued to struggle with obesity. Dina indicated that she saw exercise as a way to control her weight: "if I was concerned about a few extra pounds, I'd maybe go to the gym and work out." However, at this time, body image and physical activity were not closely linked for these two women. They were active for reasons other than just to control or alter body size and shape. They enjoyed being active.

Three other midlife women talked briefly about enjoying being active. Patricia was a 52-year-old woman who moved from Holland to Canada just last year. She was "happy with her total body" and talked about the importance of being active. She was active as a child and was active now because "it's good to lose weight. But that's not my first goal ... if I didn't like it, I wouldn't go." She was more active since she turned 40 as she had "more time" and she was "enjoying it more."

Brenda, a 55-year-old midlife woman shared that for her, physical activity needed to be enjoyable. She talked about being involved with competitive exercise

when she was younger: "I wasn't very good, and it got very competitive, so I quit, it wasn't fun anymore." Presently she enjoyed walking in the river valley: "it makes me feel better and it does help to keep the weight down."

Valerie, a 50-year-old woman who moved from England to Canada five years ago, also spoke of the importance of being active. She enjoyed being active in her younger years until she was limited by a problem with her hip. She had since had a hip replacement and was recently told that she can now increase her activity level. She explained further: "I can now go hiking ... I'm just over the moon about that ... I was just so thrilled." These three women spoke very little about the interplay between physical activity and body image.

All of these women talked about the significance of physical activity being for fun and enjoyment. They were all active when young. Three of the women talked about experiencing barriers to being physically active. However, they all maintained some level of activity because of the enjoyment they experienced from being active. Their feelings about their bodies did not seem to influence their physical activity. They did not exercise primarily to control their body size or shape. Physical activity was personally important to each of them because it was enjoyable.

Physical Activity Integrated with Self

Betty and Gail spoke in detail of the relationship between their body image and physical activity in quite a different way than the other women who exercised for body aesthetics, or for fitness, health, or enjoyment. These women spoke of exercise as being very important to them. Their sense of self was very much intertwined with

their need to be active. They both shared positive feelings of satisfaction with their body and the importance of an active lifestyle.

Betty was a 55-year-old woman who liked her body. She had 6 adult children and was divorced from her husband in her early 40's. She presently had a partner. She ran her own consulting business. She described the importance of being active as a part of her sense of self. She liked to hike, bike, walk in river valley, and ski. She was active on her own and with her family and partner.

Gail, a 47-year-old woman, also spoke very positively about her body. She was married and had one child. Gail enjoyed her work as a schoolteacher. She was a runner and felt a need to be active. Her positive feelings about her body are very much intertwined with her need to be physically active.

Body image.

Betty described herself as "a woman who's very much in touch with myself as a woman ... really grounded in my strengths and limitations." When asked how she felt about body in general, she answered:

> Generally, I feel happy about my body. It's really been, I guess, like a vessel that has provided me with so much in my life... critical eye that, you know, sucks in my stomach when I go by a mirror... also, an inside feeling, that boy, this is a damn good body and it's, gives me lots of ah, of joy and pleasure still.

Betty also shared that she received positive messages from her partner that influenced her body image. She shared that "my partner sure loves me, and keeps telling me how beautiful I am, and that's nice."

Gail talked about how the process of self-acceptance and self-reflection has changed her. She had been able to resist socio-cultural pressures to follow the social norm for thinness:

> I guess I have a sense that we now have enough information to be able to make our own choices, to what extent we're going to participate or not. I think enough of us being ourselves and trying to buy less into those images and be more realistic is the best way to reverse that. Because if I put all the blame on the men with power to control my behavior then I'm going to continue to be a victim for a long, long time.

Gail described herself using the following descriptors: "middle-aged, emotional, likes thought, and thoughtfulness... a person who likes to read, a person who enjoys communion with other people, um, and a person who runs, and a tall person." She shared further thoughts about her body: "I'm, I'm very happy with my body." She talked about liking the fact that she is tall: "I think tall people tend to look a little better in clothes, and, you know, I like the clothes I wear, so I always feel fairly confident about myself, when I'm walking around, you know."

Gail talked about other women's comments to her about her body and reflected on how she felt. Gail explained:

> I honestly think that whole thing is more of an internal thing. Because if someone said to me, 'oh my heavens, you're looking fat, or you're looking thin', or you're looking whatever, it doesn't really matter because, I mean, you have an instinctive notion of how you're feeling ... in some ways, it doesn't matter what people say.

Physical activity.

Exercise has been an important part of Betty's life. She talked about how she has "always exercised" and that she would find a way to fit in some physical activity around the demands of motherhood. "I would do the exercises with whoever was on the T.V. And, um, and I would notice that, that when I was physically active. I had more physical energy."

Betty viewed exercise as a way to manage her weight. She shared that if she needed to lose some weight, she would "just … make a decision about what I'm going to, what eating habits I'm in, and I'm going to alter. And so like, I'll do that, and, um, pick up on the exercise and then my weight would drop back to where I want it to be." Betty also talked about exercise for the fun of it. "I walk the river valley now…I just love it." She talks about her running in a positive way: "I'd go to the Running Room and to learn to run for excitement. I've always wanted to run." Exercise is also important to Betty as a means of connecting with her children. When speaking of the challenging hikes she has done with her children she remarked: "That's been a really, what a gift, to um, forge that kind of a bond, and kind of that type of activity with the young adults."

Betty talked about how important it was to her to be active and to be outside. She worked around potential barriers to exercise:

> I've always, always, even against everyone's best advice, when I had no one to walk with, I always went out walking. And that meant going out walking after dark. And um, I always figured it was worth the risk. I would rather

> take the risk of being out, ah, than to not nurture that part of me that really needs to be outdoors.

Another potential barrier to exercise was experienced during her married years. She talked about how she "always wanted to hike and I always wanted to find out where the trail went and how to get there." Her ex-husband was less interested and she felt that she was "dragging him along." As her children got older, they were more interested in the activities "and off we'd go together." Betty made the decision to leave the marriage in her early 40's. The reason she shared was that "there were limitations placed on me... and I wasn't able to do many things that I really needed to do to be able to thrive as a whole human being."

When faced with barriers to exercise, Betty talked about how she would work around these barriers. For example, she suffered an injury from her running. After trying a course of physiotherapy and strengthening exercises with no real improvement, Betty stopped running. She shared that she was not prepared to be sedentary:

> I mean, there's other ways. I love riding my bicycle. And I think I am going to check into a yoga class... and then I will supplement it with my walking, and if we ever get some snow, with some cross country skiing or some downhill skiing.

Betty set goals for herself: "usually the best thing that works for me, um, is if I've got a goal that I'm planning for, then I have to take, you know, the proper training so that I can reach that goal." Betty talked about the effect of aging on her body:

> The part of the aging that I'm not thrilled about is that my joints and that are less forgiving. So, um, if I injure myself, it just takes a longer time to heal. So I'm, I'm really experiencing some of those limitations. My knees bothered me this year after a skating accident last winter.

But again, Betty works with these limitations and potential barriers: "So, before I went backpacking, I had to really work hard to strengthen my knees."

Gail talked about the importance of being physically active in much the same way as Betty. She felt that she had a physical drive to exercise and equated it to the physical drive for sexuality. She shared that it had to do with "body chemistry", and that her "mind just feels better if I've exercised or I've been active." She explained further, "the times when I feel best is when I'm exercising or having sex."

Gail shared that when she was single she would come home from work everyday and go out again right away, and meet someone, and "swim or cycle or do whatever, and then eat somewhere." She went on to say: "I spent all my time doing that and it was really enjoyable, actually." When faced with the additional demands of caring for an ailing parent, Gail still found time for exercise. Gail valued exercise in others. She shared that she "admires people and respects people who do exercise." She felt that people who exercise or work out are more in touch with their bodies: "it's sort of an inner thing … you notice how your body is reacting."

<u>Interplay between the two phenomena.</u>

Betty's positive feelings about her body and the importance of physical activity are closely intertwined. When asked when she started to feel so good about her body, Betty gave the following explanation:

> Yeah, well, I think it's, my sense of by body has changed so much since I was in my 40's. .... I never had a sense of confidence in my ability to do anything athletic. And then I hit 40 something, and ah, I, I was 45, and I took up downhill skiing. And now I backpack and last year, I did a real challenging trek. I trained my body to be able to do those things. So, it's, there's, like there's a confidence that I've gained in doing that.

When asked about how a weight gain of 20 pounds might affect her life, Betty related the reason for the weight gain to possibly being immobilized and unable to exercise. She saw that as "a big adjustment. I would struggle with it a lot." A weight gain of 50 pounds would be upsetting because of the imagined loss of movement. Betty explained:

> It would affect my ability to, um, to be physical, to walk. I would do something about it, that probably the first thing I would do would be to get moving. And if, I mean, say my feet gave out on me, I'd have to quit walking. I'd still ride my bicycle. I can cycle, and swimming is always an option, um, for exercise, although it's not my favorite form of exercise. I'm not crazy about the water. But I, I would find a way to, if I could, you know. And I also know that for some people, when those limits get imposed on them ... being immobilized, that would be a terrible loss for me.

Gail also related her feelings of being satisfied with her body as being connected with her physical activity patterns. When asked why she thinks she feels so positively about her body, she explained: "it's probably related to exercise." She talked further about this connection: "when I run or exercise, it just feels that my

body is more alive, you know ... I have more energy and I just feel happy about it. It really isn't, um, really about weight as much as it is about just feeling good."

Gail talked about the importance of being physically active to her sense of self. She talked about how she felt when she "put on a lot of weight" during her first teaching job. She shared: "I didn't really like that." She went on to explain:

> If I suddenly stopped exercising and I put on a lot of weight, I wouldn't be happy ... I'm not just talking about exercising, the kind of activity I do is just a built-in part of my lifestyle ... I literally couldn't give that up ... unless I became a paraplegic or something. It has to do with weight, definitely, but it's also to do with well-being, too, I don't feel sort of complete or happy unless I am active.

Two other midlife women, Corrine and Irene, talked about their need to be physically active in much the same way as did Betty and Gail. Corrine and Irene, however, did not provide as much context to their experiences with body image and physical activity as did the other two women. They both expressed positive feelings about their body. Corrine, a 61-year-old woman, felt "exceedingly pleased with her body." She explained how she has received positive messages in regards to her body: "I have always gotten positive feedback from intimate relations and friends about my body type and good health. So, of course, that's going to influence and reinforce my body image."

Irene, a 56-year-old woman also liked her body, was proud of her height, and felt that she was born with the body of a natural athlete. She had a recent weight gain of 10 pounds over the last few years. She was able to accept the extra weight with

grace: "I could probably lose 10 pounds but I don't feel badly about my weight, ah, and I always adjust my clothes to whatever weight I am, so that I look good in my clothes."

Corrine and Irene both spoke of how they love to be active. Corrine maintained a very active lifestyle through daily walks and vacations around hiking, golfing, and skiing. She shared that she is proud of being physically fit and strong. She talked about how physical activity had a strong influence on the way she felt about her body.

Irene talked about changes in her body with aging. She found that she was less active now than she was in her earlier years. She shared that the reason for the inactivity was: "just getting a bit lazy, I think ... I guess I'm beginning to feel my age a little bit." She finds that she does feel physically different than she did as a younger person: "I find, for instance, playing 18 holes of golf, just too much." Irene also talked about how a weight gain of 50 pounds might affect her life. She immediately answered: "Oh, I think I wouldn't feel good ... I would have to do something about that ... I love to be active."

The importance of being physically active to these women's sense of self is evident in their quotes. Betty shared that being active increased her confidence in herself. Being physically active was equated with feeling alive and that a loss of the ability to be active would be seen as a real loss. All of the women felt very positively about their bodies and described how interrelated their need to be active was with their sense of self. Body image and involvement in physical activity were closely intertwined such that they were often not able to separate one from the other. When

speaking about their bodies, they also spoke about being active. The two phenomena were closely interrelated. For these women, physical activity was closely integrated with their feelings of self.

Changing Significance of Physical Activity

Several of the midlife women spoke of how the significance of physical activity had changed for them over time in that they had previously exercised as a way to control their body size and shape. They are now more accepting of their bodies and exercised for reasons of health, fitness, and enjoyment. Alyssa, Cassy, and Marion described in detail the process of personal change and some of the reasons for the change. They continue to be in a period of transition. These three women talked about how they have become more accepting of their bodies since they were young adults. They also shared how they have become more flexible in their patterns of physical activity and are able to recognize the value of exercise for a variety of reasons.

Alyssa was a 57-year-old dietitian who was married and had two adult children. She described herself as an older woman who was enjoying her fifties, "a very pleasant time in my life." At the present time she stated that she felt secure within herself but that it was "fairly new...has been in my 50's ... not my whole life." She talked about needing to resolve some difficult things and that now she felt older, wiser, and more confident. She sought out some counseling and found it to be "a wonderful thing to do." Through this process of counseling, her feelings about her body have changed. Alyssa was presently active in a regular weight-training program. She stated that she "loves" the exercise and feels "very solid" in her

exercise. She used to exercise primarily for weight control but now talked about being active for reasons related to health, fitness, and stress management.

Cassy was a 44-year-old nurse who had been separated for two years from her husband. She had three children. Cassy described herself as someone who was enthusiastic, creative, and emotional. She found it hard to talk about herself in positive terms and had experienced some depression in the past. She had struggled with weight fluctuations. "I've basically tried to lose weight all my life... since I was 14... so that's 30 years of dieting." She used to use exercise as a way to control body size and shape but now was exercising for health and fitness as well as for weight control.

Marion, a 45 year old married woman with two adult children had training as a social worker and was presently working in a family home business. She had also struggled with episodes of depression in the past and was currently on medication for this condition. She had mixed feelings about her body. She was heavier than she ever has been but was more accepting of her body shape and size. Marion described herself as stronger and much kinder to herself after her challenges with depression and her work with a counselor. She was also able to be more flexible in her exercise program and to "give my body a break, if I need to."

Body image.

Alyssa had mixed feelings about her body and indicated that she had struggled with accepting her body as it is. She shared, "I've been through times when I was dissatisfied, too skinny, a little too heavy, and then this concern when I sort of gained weight around the menopause time." When asked how she presently felt about her

body she stated that at the moment she is satisfied and that she knows that she "has an older body." She explained: "I look at myself naked in the mirror and I see this lady and it is okay." She then went on to clarify that she didn't know whether she was satisfied or dissatisfied. Her feelings about her body fluctuated depending on context:

> If your stomach is big you feel awful. And I find in the evening when my stomach is huge, I just, I don't feel quite so satisfied. And in the morning when I get up, I feel a lot better.

In the second interview Alyssa shared that she is concerned about the "numbers, that she would like to be below 150 pounds" and that she "hadn't been completely honest in the first interview." She felt that she hadn't covered everything and shared further thoughts on her feelings about her body:

> At some level, I do think I have a concern about weight…people will say oh you're so slim… and ah, I know that's true at a certain level, but part of me doesn't believe it. So, you know, there's part of me that's fighting.

Cassy, another midlife woman, shared similar feelings about the process of working on being more accepting of her body. Cassy responded with the following quote when asked about how she felt about her body:

> I really don't like my body at all. There you see, there I got it. It's gotta come out. I've been this weight for three years and I'm not tiny, but I'm okay … I don't really like my body but I can say I accept my body. And so I'm trying to be good to my body … because my body is a big part of who I am. It's how I live in this world.

As a teenager, Cassy felt "big, fat, ugly and clumsy." She experienced an early puberty and was taller than her peers. She used to weigh herself several times a day and shared that she had several bouts of anorexia, in her early 20's and in early 30's. Cassy talked about being unhappy in her marriage and how her ex-husband "didn't like my body." Turning 30 was a stressful time as she felt she was running out of time to attain the body she so desired. She was depressed.

Cassy was influenced by the media. She said: "I mean, they're ... the media images ...there even though I don't but the magazines. I know that those messages are coming to my brain." She explained further:

> So I think that that's part of the problem with the fashion industry, is that, um, um, if something's 'in', then even if it doesn't suit you, then you should wear it. And um, I try not to play that game ... there is that sense of this is what you have to wear this year, sometimes, and I don't buy into that anymore. I'm much happier, kind of, trying to find clothes that I like ... and that feel like me ... and that I feel like I look good in. So, I think I'm okay with the fashion industry. It's the media I have more trouble with, because there is always the sense of, um, to me, there is, of the right way to look. And I can, um, negate it in my head, and say, well that's ridiculous. Not everyone can or should look like that. But emotionally, I can't quite, quite negate it.

Cassy had worked on being more accepting of her body over the last few years. Although she still felt that she did not like her body, she had become more accepting of her body. When asked why this change occurred, Cassy answered: "I came to realize that I wouldn't actually ever have that body, like, I kept trying to

have." She took ownership of her body: "whether I thought my body was okay or not, it was mine." She became more aware of the influence she had on her own daughters' feelings about their bodies. Cassy talked about the importance of role modeling a healthy lifestyle for her daughters' sake.

Cassy described her experiences with her body as a "process" with her current partner being influential. She shared, "I'm with a guy who likes me, and he does … he likes my body." However, she goes on to clarify that: "I'm not going to have this body for him, it has to be for me." Cassy realized that she had changed in her feelings about her body. She now felt that it was more important to be "healthy, well, and fit … that's what I'm trying to focus on versus this body that's thrown me all the time." She agreed that she struggled a lot with her feelings about her body in the past.

Marion also spoke of how her body image had changed over time towards being more positive. She had struggled with accepting her body in the past. She had weight fluctuations of 50 pounds since adolescence and remembered being very hard on herself if she felt that she didn't measure up in others' eyes. Marion felt that the media influenced her body image. She shared: " I know for sure, I have always been influenced by the media."

Marion described herself as stronger and much kinder to herself after her challenges with depression and her work with a counselor. She talked about her body in this way: "I don't dislike my body as much as I used to which is ironic considering I'm heavier than I've ever been, but I am concerned about health issues, more than how it looks." She was a frequent dieter in the past and lost weight only to put it back

on again. She had experienced changes in her moods with menopause and a weight gain related to her anti-depressant medication.

Physical activity.

All three of these women shared how the significance of physical activity had changed for them over time, as they became more accepting of their bodies. Alyssa talked about how she had used exercise as a way to control her weight and body. Alyssa talked about a weight gain in her early 50's that was a trigger for her present exercise program:

> Then my weight just went up, up, up, up, up, up, up. Nothing stopping it, nothing, right up to, into the high 150's...so that's when I got panicky. It just kept going up, up, up. So, that's actually when I got into this exercise program.

In the past, Alyssa shared that she was active as a teenager. She now viewed exercise as being important for health and fitness. She felt that she was stronger now with her current program of exercise. Alyssa also exercised for mental and physical health reasons. After a diagnosis of osteoporosis and the stress of caring for an elderly father, she went to a personal trainer and learnt how to use weights. She shared that her shape had changed with the exercise and that she felt better:

> My weight has not changed. I'm a different shape. I'm a healthier shape, I guess. And 158 pounds is where I am, and that's where it stays ... I've done all kinds of things ... but I, finally, I, I'm doing fitness, and I'm, it's redistributed, but the weight is exactly where it is.

Alyssa shared that she did not want to look any different but would like to weigh less. However, she did not feel that she was ready for that level of commitment at this time:

> I, for some reason this silly number, I would like to be below 150, which is goofy. You know, like, it's not worth the effort for me to do that. I don't want to do the effort of getting down there ... I'm not very disciplined about doing aerobic stuff. And I know perfectly well that I could. If I wanted to have my weight down ... I know I could do it just by increasing my activity... that's the worst thing is I really don't, ah, push myself, I guess.

Alyssa felt a sense of control over her body in that she could lose weight if she wanted to. When asked about her current feelings about accepting her body she replied, "I know I could change if I wanted to ... I mean, I could probably go all the way down to the bottom, if I wanted."

Cassy shared that the significance of exercise had changed for her over time. As a younger person she "would do an hour of workout each day as well as play tennis." At that time, Cassy exercised primarily for weight control: "I looked at exercise as a way to somehow get, get to something that I couldn't attain... and it was something I had to do."

Cassy still felt that she had to exercise: "but I have to do it now, because, um, I want to generally feel well and I want to keep this weight. And I do have to exercise to do that... or else, not eat. And I don't want to not eat." If not exercising, Cassy felt "like I'm getting kind of soft and mushy a little bit. So, to exercise, just in terms for general well-being and a sense of feeling fitter and stronger."

Cassy's exercise patterns have changed: "I do exercise, but not, not crazily, but I just do. Like I have to do that." Even though Cassy now felt that exercise was an important part of her life, she still felt that exercise was not fun: "I don't enjoy it, I force myself." She had tried to focus on being fit and strong and having a body that "functions". She had been learning new activities such as swimming, rollerblading, and cross-country skiing. "I'm trying to think of them as activities, and say, keep your body fit ... and that sense of accomplishment about my body has been really good for me." Cassy felt good about her exercise in that she could see that she was firming up and that she had more energy. She explained further, "it's that sense that I have to do it for myself."

Marion was active as a teenager and used to be much more of a perfectionist in fitting in her exercise program. She used to "plan her day around exercise." She was now more flexible and was less likely to go to a gym: "I don't like to go to a gym. I like to plan the exercise where it might be convenient for me and I don't have to go out of my way." She enjoyed being outdoors and the changing seasons.

Interplay between the two phenomena.

Weight and appearance continued to be very important to Alyssa. When asked how a 20 pounds weight gain might affect her life, Alyssa exclaimed: "Right now ... I don't think I could handle it ... I would start to exercise and I would change what I would eat." Her work as a dietitian had brought her in close contact with clients who struggle with their weight and their body acceptance. She talked about how as a younger person she "hated fat people, really heavy people" and that now she is "not comfortable working with really, really heavy people." As well, she talked

about her difficulty with working with anorexics and that she had "a fear of really skinny people, like, I , I found I could not work with them."

Alyssa viewed exercise as a way to control her weight and body shape. She was able to keep her weight relatively stable at this point in her life but may experience some difficulties in the future if she is faced with weight gains that are not responsive to an exercise program. Her motivation to exercise included weight control as well as health and fitness. She had used exercise primarily as a way to control body size and shape but was now exercising for health and fitness as well.

Weight and appearance are important to Cassy. She described strong feelings about how important it was to her to maintain her current weight. She did not feel that it was okay to gain weight with aging. She felt that it would remain important to her to stay healthy and strong and that she would need to continue to work on it, and "not use age as an excuse" for an increase in weight.

Body image continued to have a major impact on the way Cassy felt about herself as a person. When asked how she felt when she is heavier, she responded:

> I feel really, really badly about myself. And I think that it's a form of defeat ... I didn't win that battle and that consequently, I can't do anything. And I really do feel like that ... if I gain weight, I feel like everything else about me is a disaster.

When asked how she would deal with an increase in weight, she shared that she would have to increase her level of activity. If she was unsuccessful in maintaining her present weight even with increased activity, she shared, "that would be a really hard struggle for me."

Cassy had moved towards being more accepting of her body and recognized the importance of exercise for strength, fitness, and health as she aged. She talked about how it was important to her to have a body that functioned well so that she could do the activities that she wanted to do. She was learning to say that "my body is okay, it works really well, and it can take me places, and do things that are enjoyable." Cassy was in transition towards being more positive in her feelings about her body and seeing physical activity as being important for reasons other than just weight control.

Body image seemed to hold less importance to Marion. Marion felt that she would like to weight less but had changed in that: "I don't really care what others think, if I feel good, it's good enough ... as long as I feel healthy ... I have no aspirations of a model body." When asked how a weight gain might affect her life, she replied that she would feel badly because of health reasons, it might worsen her reflux disease. Marion was working on listening to her body: "accept the fact that some things are the way they are and you do the best you can, and that's as much as you can do."

Marion talked about how being more accepting of her body influenced her exercise patterns. She planned on doing some physical activity every day but "it doesn't have to be an hour on the nose." It did not have to be formal exercise but "it can be a variety of things, if I'm gardening, or if I'm going shopping, or anything like that, I consider that all exercise." She was able to be more flexible in her exercise. "And I would now, if I'm not feeling well and I just don't feel I'm able, you know, I will give my body a break ... in the past, I would have struggled to do it."

Body size and appearance remained very important to Alyssa and Cassy. Marion had been more successful in working through negative feelings about her body and had grown more accepting of her body size and shape. All three of these women viewed exercise as a way to manage and control their bodies in the past. However, through hard work and personal growth, they had become more accepting of their bodies and were able to see additional benefits to being physically active. Part of this growth appeared to be connected with an increasing, although sometimes wavering, ability to resist social pressures to meet an aesthetic ideal that was once more important to them. They spoke of the importance of being fit, strong, and healthy. They now were more realistic with their exercise programs and felt that having an active lifestyle was of key importance. Through their midlife stage of growth and development, they had changed dramatically in the significance of body image and physical activity. They were able to view their present life experiences more positively than they had as younger women.

Women Who Are Inactive

Several of the midlife women shared that they were relatively inactive at the present time. Nancy, a 47-year-old woman, talked about her motivational problems in becoming more active. She had two adult children in Ontario and was separated many years ago from her now deceased husband. She worked in health care at a senior's lodge. She described herself as a "big person physically" and that she would "like to be thinner, not just for looks, but to be fitter."

Holly, a 52-year-old woman had been married for 29 years. She and her husband separated for 2 1/2 years during that period and have been "back together

now" for less than a year. She was unhappy with her body as she had gained a few pounds and she saw herself as a "thin" person. She was relatively inactive and talked about how she felt tired after her work as a nurse.

Body image.

Nancy talked about body image in both negative and positive terms. She shared that she would like to lose some weight and that comments from others used to hurt her a lot more in the past. She is able to like herself better now. She felt that she has changed in her feelings towards her body:

> I've learned to relax a little bit, like be good to me. My discipline used to be, like ironclad, where it's not anymore, I say, let's just let that slide a little bit. I have given myself the okay to not try too hard to be the visual that everybody wants me to be, so ... it doesn't mean I wouldn't like to wake up a 120 pounds tomorrow.

Holly shared that she was not satisfied with her body at the present time. She felt fat because she had put on 10 pounds over the last year. She explained further that she had "always been thin" and that she "liked being thin." She felt that she had "enjoyed her sexuality and, part of that I guess is my definition of, of feeling okay, and it always involved being thin."

Physical activity.

Nancy spoke of being active in her earlier years with the demands of single motherhood. She talked about joining a spa in her 30's and found it to be "enjoyable stuff ... liked the social aspect of it too." She would like to be more active: "to be fitter, not necessarily thin, would like to be toned up." Nancy found her body size as

limiting her: "I find it really, really hard to, ah, to do simple things ... work and play ... I went dancing ... I was just exhausted. It limits you and the more you sit the more you want to sit, too." Nancy talked about other barriers to exercising:

> I find it so hard to exercise even, even to walk or bike, or, to the point where I would rather do it alone, because I don't like to be with someone who can do it ... I don't want people to decrease the speed of their walk because I can't do it.

Holly talked about the barriers to being active that she had experienced. She felt that she would feel better if she exercised because she would feel "more fit." She had noticed changes with aging: "I think I am more sedentary ... I am certainly feeling my age and feeling more fatigued, and I feel like doing less in the evenings." She talked about enjoying power walking with a friend several years ago and shared: "I felt wonderful doing it. But just to get the momentum, to get out, its, ah, huge."

Interplay between the two phenomena.

For both women, body size and shape were important. Nancy emphasized the importance she placed on body weight when she shared that if she gained 20 pounds, she would "go over the edge ... I think I would lose my mind or who knows what. I don't know what I would do. I don't want to think about it." Holly responded to the same question with: "It would be terrible. I would absolutely hate myself ... because I like being attractive ... with extra weight I would feel very, very unattractive, I would feel ashamed."

Nancy was presently struggling with decreased motivation around exercise. She was knowledgeable about the benefits of exercise but was not feeling ready to initiate an exercise program at this time:

> I know what I have to do, I know I have to, you know, get on an exercise program, and eat less, and eat low fat, and ah, and have fun with it, and know that this is going to be for the rest of my life ... I am just not ready yet (laughs) but I will, I will.

Both Nancy and Holly shared that they are experiencing barriers to being physically active. Karen was a 52-year-old woman who was also inactive. Physical activity was not significant to her at the present time. She felt very negatively ai her body and was unhappy with a weight gain that she attributed to her medication for depression. Physical activity to Karen was "I chase the kids around and I clean up after them." When asked how her physical activity influenced her feelings about her body, she did not have a response.

These three women were inactive. Nancy and Holly felt that they should be exercising, but that at the present time, they lacked the motivation to get started. Nancy talked about the importance she places on being fit and strong and feels that a regular exercise program would help her achieve that. Holly placed more importance on being slim. She also felt that an exercise program would help her to achieve that. For all of these women, physical activity was not playing a significant role in their present-day lives.

Summary

The significance of body image and physical activity within midlife women's experiences was discussed through the quotes of the study participants. Women ranged in body image from one end of the continuum to the other, from not being satisfied to being very satisfied. Many of the women spoke of changes in their body image related to life events and personal experiences. Body image was dynamic and fluctuated depending on the context of midlife women's socio-cultural experience.

Women shared common ideas about the significance of physical activity in their day to day experience. Six main themes were identified through analysis of the data. Women who had changing significance of physical activity as well as women who were inactive were discussed separately. There was overlap throughout as women at times were contradictory in their discussion of the significance physical activity played for them.

The interplay between body image and physical activity was complex and dynamic. Body image influenced women's participation in physical activity, sometimes positively and sometimes negatively. Likewise, physical activity also influenced the feelings the women had about their bodies. Further discussion of these findings will follow in the next chapter.

Chapter 5

Discussion

The intent for this chapter is to integrate the findings of this research study into a comprehensive picture of midlife women's experiences with body image and physical activity. The relationship between body image and physical activity was found to be complex and dynamic. Individual women attach varying degrees of importance to their experience with body image and physical activity. There are multifaceted layers of socio-cultural influences on midlife women's experiences. Women's roles, life events, genetics, and experiences with menopause and aging contribute to their overall experience with body image and physical activity. The understanding of body image and physical activity within the context of the women's experience is enhanced through the grounded theory arising from the findings of this study.

Significance of Physical Activity and Body Image for Midlife Women

The major findings of this study included the identification of six main themes. These themes that emerged from the data and that constitute a grounded theory of the significance of physical activity and body image for midlife women are: 1) physical activity to decrease body size, 2) physical activity to mold and shape the body, 3) physical activity for fitness, 4) physical activity for health, 5) physical activity for fun and 6) physical activity integrated with self. Women with changing significance of physical activity and women who were relatively inactive at the present time were presented separately as their experience differed from the other midlife women.

During the final stages of comparative analysis and the identification of major themes and patterns, the writing of Deci and Ryan (1995) was helpful in locating the understanding of motivation and behavior in midlife women's experiences with physical activity and body image within a more generalized theoretical context of human behavior. In their paper on efficacy, agency, and self-esteem, they suggest people range from being primarily intrinsically motivated to being primarily extrinsically motivated. Intrinsic motivation includes behaviors that come from one's self and are self-determined while extrinsic motivation includes behaviors that are performed primarily to attain some separate consequence or reward. Extrinsic motivation tends to be more controlled and to have more negative outcomes than does intrinsic motivation. Deci and Ryan (1995) suggest that intrinsic motivation can be achieved through the internalization and integration of meaningful aspects of one's social context.

Deci and Ryan (1995) present four types of extrinsic regulation as a differentiated view of extrinsic motivation that result from the different degrees of internalization and integration. These four types of extrinsic motivation include 1) external regulation where behaviors are prompted by external motivators, 2) introjected regulation where behaviors are motivated by internal pressures, 3) identified regulation where behaviors are accepted as personally important, and 4) integrated regulation where behavior results from the integration of values into one's sense of self. Deci and Ryan (1995) argue that integrated extrinsic regulation together with intrinsic motivation form the basis for self-determined functioning and true self-esteem.

The six major themes that constituted the grounded theory that emerged from the data were organized within the context of the types of extrinsic regulation so as to locate the theory within a broader conceptualization of human motivation and behavior. The first two themes from the data that were identified included those midlife women who were physically active as a way to decrease their body size or to mold and shape the body. These women fit closely with Deci and Ryan's (1995) first type of extrinsic regulation, that of external regulation where external motivators prompt behaviors. These women who spoke of physical activity as being significant for the management of body size and body shape were extrinsically motivated. Their motivation to exercise was closely related to the external factors of body aesthetics. These women were active as a means to an end, to control their weight and body appearance. The women shared that they felt that they "had to be active" and that they were hoping to be rewarded with a desired body "look." The motivation for physical activity for these women was primarily extrinsic as they hoped to maintain or alter their body size or shape, and improve their body image through exercise.

The midlife women who spoke of physical activity as being significant for reasons of fitness, health and enjoyment fit closely with Deci and Ryan's third type of extrinsic regulation, that of identified regulation where behaviors are accepted as being personally important. For these women, they had one thing in common; their motivation stemmed from the belief that physical activity was important to them. They made the conscious choice to be active because they "wanted to." The women's motivation for being physically active was not extrinsic in nature as was the women who exercised to control their body size and shape. These women were

identifying with the value and importance of physical activity in their experience as midlife women.

The last theme that emerged from the data around the significance of physical activity in midlife women's experiences was that of physical activity integrated with self. The integrated women in this study had a close fit with Deci and Ryan's (1995) fourth type of extrinsic regulation, that of integrated regulation, which results when values are integrated into one's sense of self. The integrated women talked about how their sense of self was closely intertwined with their need to be active. This need to be active was integrated in such a way that they could not imagine ever being inactive or immobilized. Being physically active was equated with feeling alive. They were autonomous and self-regulated in their need for physical activity. For these midlife women, physical activity was integrated with their sense of self.

Deci and Ryan (1995) suggest that motivation for behavior is altered over time within the context of the life experiences of the individual. The transitional women in this study support this position. These women shared that the significance of physical activity was changing for them as they experienced important life events. Their day-to-day experiences were very much influencing their feelings about their body as well as their motivation to be active. These women talked about how traumatic events such as depression, marriage breakup, and the death of a loved one stimulated thinking and reevaluation around the significance of body image. In the past, these women had strong negative feelings about their bodies and had exercised as a way to deal with these feelings. After much personal growth, they were able to be more accepting of their bodies as well as be more flexible in their exercise

program. The significance of physical activity was changing in that they now recognized the importance of fitness, health, and enjoyment through physical activity. They were experiencing fluctuations and changes in the significance of physical activity as influenced by cultural factors. The experiences of the midlife women in transition provide further insights into how this process of change occurs over time.

Several limitations to the fit of the research findings around the significance of physical activity in midlife women's experience with Deci and Ryan's (1995) work were identified during the analysis phase. Midlife women's experiences in this study did not support Deci and Ryan's (1995) second type of extrinsic regulation, that of introjected regulation, where behaviors where motivated primarily by internal prods and pressures. There were no midlife women who shared that they were active primarily because they thought they should or that they would feel guilty otherwise. However, the women who shared that they were physically active as a way to control their body size and shape also shared feelings of "having to exercise." These women felt internalized pressure to be active that was closely connected to the extrinsic motivators of body size and shape. It was not possible to separate women who were extrinsically motivated from women who were experiencing internalized pressure to be active. Therefore, Deci and Ryan's (1995) first type of extrinsic regulation, external regulation and their second type of extrinsic regulation, introjected regulation were combined. This grouping more closely reflected the experiences of the midlife women who were active as a way to control their body size and shape.

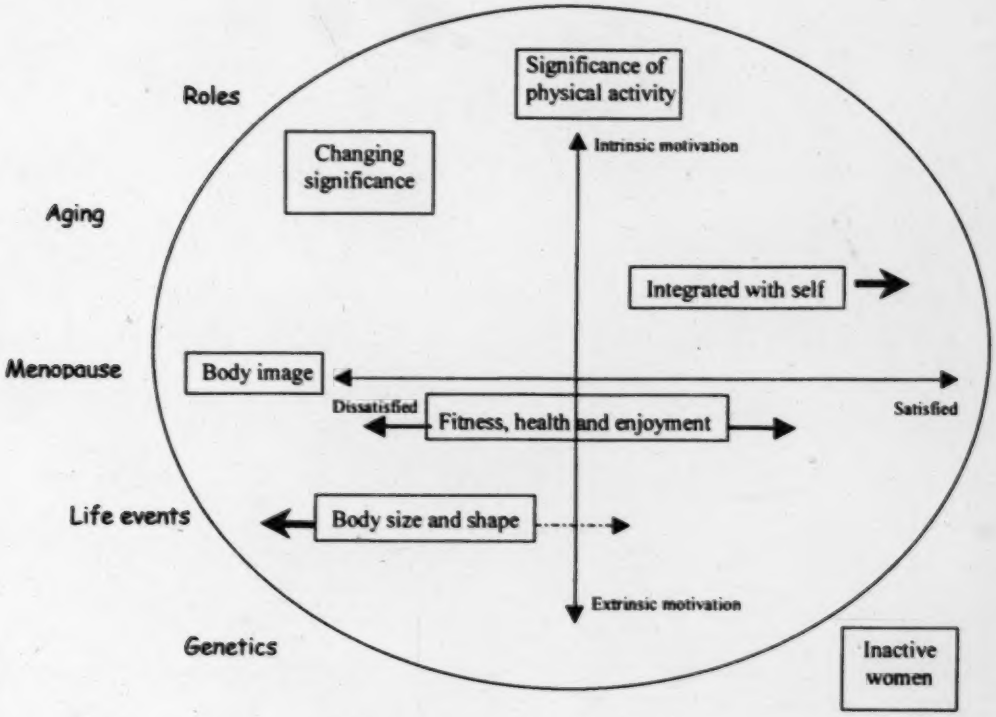
As well, women who were inactive did not fit well with Deci and Ryan's (1995) four types of extrinsic regulation. These women were experiencing significant

barriers to physical activity. They talked more about their motivational challenges around being physically active than they did their motivators to physical activity. At the time of the interviews, barriers to being active were very much influencing these women in their experience with body image and physical activity. For example, these inactive women were experiencing heavy work demands, limited resources, and a marriage separation at the same time as adult children were moving out. These traumatic events were adding additional stress and burden to these women's day to day experiences. Thus, they were unable to "get moving" even though they expressed that they wanted to be more active. The lack of fit with these inactive women's experiences and Deci and Ryan's (1995) types of extrinsic regulation reinforces the importance of considering the complex socio-cultural factors influencing midlife women's experiences.

Based on the findings from this study a model of the interplay between body image and physical activity within the context of midlife women's experiences was developed (Figure 1). This grounded theory of midlife women's experience with body image and physical activity is interpreted within the larger context of theory around motivation for behavior. The model presents the relationship between body image and the significance of physical activity on intersecting continua. Midlife women shared feelings about their body image that ranged from being dissatisfied with their body to being satisfied with their bodies. Some of the midlife women were unsure about how they felt about their bodies while others shared that their body image fluctuated according to the context of their experience. For midlife women, the significance of physical activity was described according to whether their

motivation was primarily extrinsic or intrinsic. The intersecting continua are reflective of the complex dynamic interplay between these two phenomena.

Figure 1. The interplay between body image and physical activity within the context of midlife women's experiences



Women who were physically active as a way to control their body size and shape were placed at the lower end of the physical activity continuum with their motivation being primarily extrinsic. These women tended to be dissatisfied with

their bodies as shown by the double arrow pointing towards the left of the body image continuum. The women who shared that the primary significance of physical activity was for fitness, health, and enjoyment were placed in the middle of the continuum between extrinsic and intrinsic motivation. These women varied in their feelings about their bodies, some felt positively while others felt negatively. The women who were seen to be integrated and intrinsically motivated were placed at the upper end of the physical activity continuum. These women all expressed strong feelings of satisfaction with their bodies. The women who expressed a changing significance of physical activity were randomly placed on the model. These women shared that the significance of physical activity and their body image fluctuated and changed according to the context of their experience. The inactive women were placed outside the circle enclosing the intersecting continua as they talked more about their challenges with being active than they talked about the significance of physical activity.

The findings from the study indicated that there were complex inter-relationships between body image and physical activity in midlife women's experiences. The interplay between these two phenomena is greatly influenced by the context of each woman's experience. Roles, aging, menopause, life events, and genetics all contribute to this unique experience for midlife women. A discussion of this model through the experiences of midlife women in this study will follow. This discussion will address the two research objectives: 1) to develop an understanding of the interplay between body image and physical activity for midlife women and, 2) to explore the socio-cultural factors that influence these two phenomena.

Interplay between Body Image and Physical Activity

Body image and physical activity were closely linked for midlife women who were active as a way to control their body size and shape. These women expressed feelings of negativity and disappointment in their bodies when they did not achieve their desired slim look. These women also shared how they were influenced by the media as well as by other people, such as health professionals and romantic partners. This finding further reinforces the research of Allaz et al. (1998) and Cash & Henry (1995) in that body weight dissatisfaction and social pressure to be thin exists in midlife women. For these midlife women who were active as a way to control their bodies, body image was seen as being very important.

Physical activity was one behavior these women used to attempt to mold their bodies into a preferred size and shape. These midlife women tried to exert control over their bodies and achieve the thin ideal through a program of exercising. This finding was consistent with literature around the search for a perfect body (Brownell, 1991a). The assumption that the body is infinitely malleable and that with the right combination of diet and exercise all women can achieve the aesthetic ideal is false. Williams & Germov (1999) further support the position that women who are exposed to the thin ideal from childhood internalize the need for a thin body. For some of the midlife women, a negative body image motivated their involvement in physical activity. Frederick and Shaw's (1995) qualitative research is consistent with this finding. These researchers found that appearance concerns were at the root of the motivation to attend aerobics classes for some younger women. However, contrary to a study by Loland (1998) that found that physical activity promoted increased

satisfaction with one's body, some of the midlife women in the present study felt increasing dissatisfaction with their body even with exercise. These midlife women were left feeling betrayed by their bodies when they did not respond to the physical activity in the way that the women had expected.

Maquire and Mansfield's (1998) qualitative research provides further support that corresponds with the experiences of these midlife women. These researchers found that women exercised as a way to discipline their uncontrolled bodies. They raised the concern that women pursue a perfect body through the use of exercise. For all of the midlife women in this study who exercised to control their body, being physically active had the potential to impact negatively on their body image. Body image and physical activity were closely intertwined for these women.

There was little interplay between physical activity and body image for those women who exercised for fitness, health, or enjoyment. These women shared that they generally felt positively about their bodies and they were able to accept their body size and shape. For these women, body image was not important to their experience as midlife women, being physically active was personally important for reasons unrelated to body image. These finding do not support the writing of McKinley (1999) who stated that women strive for an "action beauty" or beauty based on athleticism. Rather there was consistency with Saltonstall's (1993) phenomenological research where women shared that they exercised as a way to stay healthy and to maintain function and capacity. These midlife women were not concerned about their appearance or the societal norms for the thin, athletic look. They were more concerned with being fit, healthy, and enjoying their physical

activity. There was little connection or interplay between body image and physical activity for these midlife women.

For the integrated midlife women, body image and their need to be active were closely linked and intertwined. These women talked about the importance of being physically active as they described positive feelings about their bodies and themselves. They saw being physically active as being important for wellbeing and could not imagine being inactive. They felt strongly that their feelings of satisfaction with their bodies were closely related to their need to be active.

There is support in the literature about the close link between positive body image and physical activity. Lutter & Jaffee (1996) suggested that being physically active could improve one's body image. Poole et al. (1997) found that participation in exercise resulted in women feeling "good" and "in touch" with themselves with improvement in their feelings of self worth. This finding was supported by the stories of the integrated midlife women as they talked in depth about the close links they experienced between body image and physical activity and how being active influenced positively their body image.

For these integrated women, being physically active led to strong feelings of satisfaction and confidence in their bodies. Although they felt positively about their bodies, they placed more importance on being active than they did on their body image. Their positive feelings about their bodies were so closely linked with their need to be active that these women did not separate the two phenomena through their story telling in their interviews. The two phenomena of body image and physical

activity were closely intertwined for these women in whom physical activity was integrated with their sense of self.

For the midlife women in transition, body image and physical activity were also closely linked. These women talked about liking their bodies more as they developed a greater sense of ownership and the realization that their bodies belonged to them. The significance of physical activity was changing for them as well. As they became more accepting of their bodies, they were able to relax and be more flexible in their activity patterns. These women had previously exercised to maintain their body shape and size. They now talked about other benefits of being active and were able to be more in touch with the needs of their bodies. Their changing feelings about their bodies were very much interrelated with their changing experiences with physical activity.

There is little literature support for the changes women experience in the relationship between body image and physical activity. Davis (1997) talks about body image having both fixed components and fluid components. There was no literature describing the ongoing process of change for midlife women with body image and physical activity according to the context of their experience. Several authors suggest that midlife is a time of transition and change (Appleton, 1994; Cohen, 1998; Fogel & Woods, 1995). The transitional women in this study lead one to believe that this time of transition and change during midlife very much influenced their experience with body image and physical activity.

The nature of the relationship between body image and physical activity in all of the midlife women was found to be complex and multifaceted. The dynamic

complexities of the relationship are illustrated by the experiences of the midlife women. It is encouraging to see the direction of movement for the transitional women towards intrinsic motivation and integration. This finding is supported in the writing of Deci and Ryan (1995) as they suggest that extrinsically motivated behaviors can become intrinsically motivated over time. There is, however, little discussion around how this change occurs within the context of the life experience. A closer look at the factors influencing midlife women's experience will add to the understanding of the interplay between body image and physical activity.

Socio-Cultural Factors Influencing Midlife Women's Experiences

The findings from this study suggest that women's experiences with body image and physical activity is not static but very much fluctuates in response to their day-to-day life situations. A closer look at midlife women's experiences highlight the importance of their environment as influencing the interplay between body image and physical activity. Midlife women shared rich and detailed accounts of how roles, genetics, life events, menopause and aging influenced their experiences with body image and physical activity. All of these influencing factors were culturally framed in that the midlife women's talk suggested that they interpreted these factors, even biological factors, in the context of their lived experience. These factors that influenced midlife women's experiences were complex and diverse. A focus on how some of these factors influenced the interplay between body image and physical activity for midlife women will guide this discussion.

There is a paucity of research describing socio-cultural factors influencing women's experience with body image and physical activity. Delaney et al. (1997)

provide evidence that women's experiences with body image concerns need to be understood as a multidimensional construct with both individual and contextual elements. The younger women in their study validated the contention that women's experiences with their bodies cannot be isolated from their social frameworks. Several authors spoke to the importance of considering the context of midlife women's experience within their world (Banister, 1999; Fogel & Woods, 1995; Jacobson, 1995). The findings from this study on midlife women's experiences of body image and physical activity offer further insights into the multifaceted layering of influencing factors for these women.

Midlife women spoke of their experience with the aging process and menopause in different ways. For example, midlife women who were physically active as a way to control their body size and shape had difficulty accepting the changes in their bodies related to their life course. Body image was of such importance to these women that several initiated their exercise program in direct response to the changes that they were experiencing related to menopause and to aging. These women spoke of being upset over cellulite and extra weight that they attributed to menopause. One woman shared that she was not going to let her body get old. These biological changes in women's bodies were interpreted within the context of their life experience.

The integrated midlife women spoke of the aging process in more positive ways. These women were more able to accept the changes in their bodies in a healthy fashion. One woman shared that she had experienced a weight gain related to aging. She made the choice to accept this change and had her clothes altered so that they

would fit more comfortably. This same woman talked about how she is sensitive to the needs of her body and will slow down her activity patterns as necessary. Another midlife woman talked about the importance of genetics as she compared her own aging body to that of her mother's. She shared that she expected to experience similar body changes as had her mother over time. The increased acceptance of one's body and the ability to listen to one's body are consistent with literature on healthy midlife transition (Banister, 1999).

The midlife women who were in transition also talked about their experience with body image and physical activity in much the same way as did the integrated women. The transitional women shared that they had become more accepting of their bodies over time and were able to be gentler with their body in response to this change in their body image. They were influenced by significant events in their lives. One of the women had experienced severe depression in the past. Another woman had been through a difficult marriage breakup. These women shared that through the process of dealing with these traumatic events, they matured and grew. These transitional women all talked about personal change and growth in their relationship with their body and physical activity.

Roles were instrumental in influencing midlife women's experience with body image and physical activity. These women shared many different roles that made their own midlife experience unique. These roles, to mention just a few, included those of wife, partner, single woman, mother, daughter, and worker. The mothering role was especially significant to these women's experience. For example, one transitional woman talked about the importance of role modeling a healthy

acceptance of her own body for her daughter's sake. Another midlife woman spoke of her need to stay healthy through activity so that she was better prepared, both physically and mentally, to deal with an ill child. Many of the women talked about the value they placed on being active and how that value was transferred to their children. Work roles and partner roles also played an important part in influencing midlife women's experience with body image and physical activity.

All midlife women experienced barriers to being physically active. A discussion of these barriers illustrate further how each woman's experience with body image and physical activity is very much influenced by the context of her unique situation. Inactive midlife women especially struggled with decreased motivation to exercise. These women suggested that they would likely feel better about themselves if they were more active. However, the barriers of being too tired at the end of a busy workday to fit in physical activity and having less energy were creating roadblocks for these women. One woman talked at length about how she was knowledgeable about the potential benefits of being active but at the present time did not feel ready to initiate any changes in her lifestyle. She was experiencing significant life events around managing her life as a single mother with limited resources. Anther woman had recently experienced a time of personal turmoil around an unexpected marriage separation and "empty nest syndrome." Her children were becoming more independent young adults while she was considering living her life on her own. It is not surprising that both of these women shared that they had limited motivation to be physically active at the present time.

Another midlife woman, who had struggled with obesity and a negative body image for much of her life, experienced some unique barriers to being active. Vicki talked about her experiences with feeling ashamed to be seen exercising because of being overweight. This barrier of social physique anxiety as influencing exercise behavior was addressed in the literature (Lantz et al., 1997; McAuley et al., 1995). These authors suggest that body image dissatisfaction and subsequent influence on exercise behaviors is present in midlife women. The concern was raised that social physique anxiety might keep women from participating in the exercise behaviors. This concern was not supported by the experience of this woman. She continued to be active despite experiencing strong personal and societal barriers.

Other midlife women shared that they were also able to work around barriers to exercise. One single woman shared that she experienced limited time and resources to enable her to be active and so took up daily walks with her dog. Another woman experienced a marriage breakup and subsequent loss of her social network, which had involved many opportunities for physical activity. Another experienced limitations in her ability to stay active due to pain in her hip. All of these women found ways to work around these barriers to maintain some level of physical activity.

Integrated women with their "need to be active" talked about how they turned barriers for exercise into challenges such that they could remain active. They shared that they continued to exercise even when they were experiencing demands on their time. Another woman talked of how she changed her pattern of physical activity after an injury limited her choice of activity. These women remained active despite

barriers and life events that influenced their experiences as midlife women with physical activity and body image.

All midlife women struggled at times with motivation around being physically active. The writing of Vertinsky (1998) supports the finding. This author suggested that it is important to consider the broad social and economic contexts of women's lives in order to better understand their experience. For those midlife women who were inactive, the barriers to physical activity appeared to be insurmountable at the present time because of their life situations. Being physically active is not only related to the choice of the individual. The factors influencing their lifestyle practices are very much interactive within their environment. Thus, it becomes clear that women's experiences need to be understood with consideration and understanding of their socio-cultural context.

Summary

The understanding of midlife women's experiences with body image and physical activity is enhanced through the use of the model as presented in this chapter. Midlife women varied greatly in their experience with body image and the significance of physical activity. Body image and physical activity were closely linked and intertwined for most of the midlife women. Midlife women's experiences with body image and physical activity is seen to be fluctuating throughout their life course. The interplay between these two phenomena needs to be understood within the context of the women's life experience. Midlife women's experiences with body image and physical activity can be understood within broader theory of human motivation and behavior.

Chapter 6

Conclusion

This study provided an in-depth description of the relationship between body image and physical activity within the context of socio-cultural factors influencing midlife women's experiences. A grounded theory approach using qualitative methods allowed for the development of further insights into the complex interplay between these two phenomena. A model of the interplay between body image and physical activity within the context of midlife women's experiences was developed. The integral relationships of these important concepts offer important insights into midlife women's overall health. The study of successful midlife transition must consider the context of women's experiences as influencing the relationship between body image and physical activity.

The major findings in this study suggest that midlife women's experiences with body image and physical activity are complex and dynamic. There was a close interplay between body image and physical activity for many of the midlife women. Feeling dissatisfied with their bodies and experiencing pressures to be thin motivated physical activity in some of the midlife women. These women shared feelings of frustration and disappointment when their bodies did not conform to the societal ideals for a thin, slim body. For these women, body image and physical activity as a way to control one's body were intertwined.

Integrated women also demonstrated strong links between body image and physical activity. For these women in whom physical activity was integrated with their sense of self, their positive feelings about their bodies were closely linked with

their need to be active. Remaining active was of key importance to these women. Physical activity added to their sense of worth and their overall well-being.

Body image and physical activity were closely linked for these midlife women. However, the women who were motivated to be active because of dissatisfaction with their bodies experienced negative outcomes from exercising. The strong socio-cultural influences these women experienced as they worked towards the "perfect body" limited their ability to move towards internalization and integration of the value of physical activity in their life experience in a healthier way.

The midlife women who described a changing significance of physical activity provided further insight into the interplay between body image and physical activity. Their changing feelings about their bodies related to their changing experiences with physical activity. This transition is reflective of women's experience throughout their life stages. Midlife has been understood as a time of transition. The findings in this study illustrate that midlife women's experience with body image and physical activity changes over time and are very much influenced by the context of the women's lives.

Contextual factors interpreted within a socio-cultural frame, such as roles, life events, genetics, menopause and aging influenced midlife women's experiences. Many of the midlife women are experiencing barriers to physical activity that go beyond individual choice for lifestyle behaviors. Midlife women are very much influenced by the broad environments in which they live.

Study Limitations

A limitation of this research on midlife women's experiences with body image and physical activity is associated with the study design in the data collection phase. The semi-structured interview guide that was used in this study was designed for use in the larger study on women and body image. There was a minimal focus on the interplay between body image and physical activity in the initial interviews. As well, the focus of looking more closely at body image and physical activity became more defined as the data collection and analysis continued. Despite this limitation, this process is consistent with a grounded theory approach. The latter interviews include much richer descriptions of the experiences women had around body image and physical activity as further probing and exploration revealed insights into the phenomena.

In some ways, using an interview guide that was very broad in nature to explore the many facets of women's body image experience added to the study's findings. Data were collected on women's experiences with body image and physical activity throughout each of the two interviews and not just from the questions designed to explore these phenomena. For example, with the midlife integrated women, early on in the first interview, they talked about the importance of being active in their description of themselves. As well, in response to the question of how a weight gain might affect their life, these integrated women explained that they would equate a weight gain with inactivity. They then went on to share how a loss of the ability to move would be a huge adjustment for them to make in their lives. These examples from the text of the integrated women suggest that using broad interview

questions around body image experience for women provided rich, descriptive stories that added to the understanding of the significance of physical activity.

Implications for Research

Implications for further research in this important area of midlife women's health are numerous. There is a need to add further to the knowledge around what behaviors women use to pursue the "perfect body" and whether these behaviors are seen as adding to their sense of well-being. A continued focus on the relationship between body image and physical activity with particular attention to age differences and socio-cultural differences would add to the understanding of the complexity of the interplay between the two phenomena.

Researchers need to explore more fully the impact of socio-cultural factors that influence the overall life experience for midlife women. Further study on successful transition in midlife with emphasis on the interplay between body image and physical activity is needed. The use of multidisciplinary, collaborative approaches using both quantitative and qualitative methods would add to the richness of the understanding of midlife women's experience. Women need to be included at all levels of the research process with the opportunity to share their personal journeys towards health and wellness. Women's health research needs to be expanded such that the complex issues surrounding women's life course can be further explored. Further research will facilitate a broad, comprehensive and balanced understanding of midlife women's experiences with body image and physical activity.

Implications for Practice

Implications for health promotion practitioners are important to consider as well. Practitioners working with women need to continue encouraging women to be active. Health Canada (1999) recommended the strategy of initiating health promotion projects that will counter inactivity and increase active living and fitness among women of all ages. By encouraging women to be active, there are positive benefits on body image and overall health. Practitioners can encourage healthy lifestyles by promoting body satisfaction and body diversity as well as behavior choices leading to improved health. Practitioners must examine their own biases and assumptions about midlife women and their experience with body image and physical activity. Health promotion programs must make available current and accurate information about changes and challenges associated with midlife.

The factors influencing healthy lifestyle practice with physical activity and the relationship with body image are very much intertwined in women's experiences. These factors need to be taken into account when working with midlife women. It is important that practitioners consider strategies that attend to the many barriers to being physically active that midlife women experience. There is a need to fully consider the impact of the socio-cultural factors on the context of women's lives.

Health promotion programs must take responsibility for advocating for and empowering individuals and communities to deal with the complex interplay between the variables influencing health. Women need to be encouraged to critically reflect and question their own experiences with body image and physical activity and then be helped to take action both individually and collectively. Change must be created such

that women feel more free to be physically active where the focus is on the pleasure of being active as an end in itself. Women must begin to feel more at home in their own bodies and to celebrate individual differences and uniqueness. A social climate in which diversity in body size and shapes is more accepted needs to be encouraged. Greater numbers of midlife women may then experience the relationship with body image and physical activity as a health promoting strategy.

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Appendix A: Recruitment

Women and Body Image

What is this research project all about?

We are interested in learning about women's experiences with weight changes, body changes, and lifestyle habits.

Who is conducting this project?

Researchers form the University of Alberta in the Department of Agriculture, Food and Nutritional Science and in the Centre for Health Promotion Studies.

How can I help?

Women who take part in this study will be asked about the changes they have experienced in their weight, in their body, and in their health.

Why is this project important?

The goal of this project is to better understand women's experiences with their bodies. The information will be used to develop health programs to improve women's body image.

What is in it for me?

You will feel good about providing information that will help other women. You will have a chance to talk about weight and body issues you have encountered in your life.

Who can join the research project?

We are looking for women between 20 and 60 years of age, who live in Edmonton and the surrounding cities.

If you are interested in learning more about this project or in becoming a participant, call Janet or Marie-Claude at 492-3989

Appendix B: Telephone Screening

Telephone screening questionnaire

Name:_____

Telephone number:_____

Recruitment site:_____

A) Can I ask you a few questions to make sure you are eligible to participate in this study? (verbal consent)

B) Are you between 20 and 60 years old?

Yes ☐ No ☐ **(go to refusal)**

C) Are you pregnant or have a child under the age of one?

Yes ☐ **(go to refusal)** No ☐

D) Have you suffered or are you presently suffering from a serious medical condition or a disability? (i.e. breast cancer, diabetes, paralysis) Do you believe your condition influences your body image?

E) Do you consider yourself to be overweight, of normal weight, or underweight?

Over weight ☐ Normal ☐ Underweight ☐

F) How do you feel about your body weight?

Positive ☐ Negative ☐ Not clear ☐

Refusal note: We greatly appreciate your interest in this research project but unfortunately at this time we are looking for women who (reason rejected). Would you like us to keep your name and number on file for potential future research projects? ***Thank you very much!***

Appendix C: Consent Form

Title of research project: **Nutrition Education for Social Change: Women and Body-Image**

Investigators: Dr. Kim Raine-Travers, 492-7584
Dr. Marie-Claude Paquette, 492-3989

Purpose of the Research:

We are interested in understanding your experiences with your weight and body changes, this includes your experiences with any lifestyle changes in diet, exercise and smoking and any health changes you have experienced in the last few years. We are also interested in understanding how women's views of their bodies change as they age and what you believe society expects women's bodies to look like at different ages.

Procedures:

The interviewer agrees to:

*Call you to arrange appointments for two individual interview sessions that will be scheduled at times and places that are convenient for you. Each interview will last about 1 - 1½ hours.

*Conduct two individual, tape-recorded, interview sessions with you, turn off the tape recorder any time you request it, and honour your wishes to decline to answer any question.

*Keep your identity confidential. We may use quotes from your interviews but you will not be identified. All tapes will be erased after they have been typed, and your name will be changed to a code name in all interview materials and transcripts. The transcripts will be saved for research purposes only.

*Provide a summary of the results of the project to you if you wish to receive one.

You as the interview participant agree to:

*Participate in two individual tape-recorded interviews about your experiences of body image, health and life-style.

*Call the interviewer to reschedule an interview if you are unable to keep an appointment, phone Janet Chambers or Marie-Claude Paquette at **492-3989**

Possible Discomforts with Participation:

You may experience some inconvenience associated with the time involved for interviews (~2- 3 hours). It is possible you may be uncomfortable with some of what you learn about yourself and your body image through the interview process. If you are uncomfortable and feel you need assistance, the Eating Disorder Education Association (EDEO) has compiled a list of professionals in the Edmonton area who work with eating disorders. The EDEO can be contacted at **944-2864**, and they can help you find a professional who meets your needs.

Possible Benefits:

This research will be useful for health care providers to better understand and respond to the needs of women. It may also be useful for you and other women in increasing awareness and acceptance of a range of body sizes.

CONSENT:

I acknowledge that the research procedures described on the Information Sheet and of which I have a copy have been explained to me, and that any questions that I have asked been answered to my satisfaction. In addition, I know that I may contact the person designated on this form, if I have further questions either now or in the future. I understand that I may not personally benefit, but by joining the research study, others may benefit. I understand the possible risks and discomforts. I have been assured that personal records relating to this study will be kept confidential. I understand that I am free to withdraw from the study at any time without jeopardy to myself.

_____

(Name)

The person who may be contacted about the research is:
Dr. Kim Raine-Travers
Phone No.: 492-7584

_____

(Signature of Participant)

_____

(Signature of Witness)

_____

(Date)

_____

(Signature of Investigator or Designee)

Appendix D: Interview Guide

Interview One

Introductory statement:

As you know, I am mostly interested in learning more about how you feel about your body in general and your body weight. However, some questions deal with issues that are larger than this focus on the body because I am interested in your experiences as a woman living in our modern society.

Icebreaker and life course

1-Women play many roles in life. For example, they may be mothers, workers, wives, students, volunteers, friends and daughters. Could you describe for me the different roles that you play right now in your life?

Can you tell me more about each role?

How have your roles been changing?
(Probe for changes in number, importance, and type of roles)

Body image

2-How would you describe yourself?

3-How do you feel about your body in general?

About your present weight?

How do you know/judge if you are over weight, underweight or just ok?

Does anything make you feel bad about your body or weight?

When did you start feeling this way? (probe for events)

Does anything make you feel good about your body or weight?

When did you start feeling this way? (probe for events)

4- Can you tell me of an experience where your body (body weight and appearance) influenced your everyday life....your family....your friendships.... your co-workers....your intimate relationships?

5- I am really interested in understanding how you came to feeling this way about yourself. Why do you think you feel this way about your body?

6-How do others influence the way you feel about yourself?

7-Do you feel pressure from important people in your life to control your weight? Why do you think they are concerned? How do you react to their comments and concerns?

8-What messages do your family....other women....other men.... give you about your body

9-What messages does the media....the fashion industry (magazine and television) ....the cosmetic industry give you about your body?

10-What messages the medical community and health professionals give you about your weight (your body?)?

11- Do you have anything you would like to add?

Thank you very much!

Interview Two

Body image trajectory

12-How has the way you feel about your body changed since you were an adolescent? (events that occurred that prompted a change in the way you feel about your body? events that occurred that prompted a change in the way you feel about your body weight?)...in your 20's....in your 30's.... and so on.

Related to weight issues: body weight, waist size, figure or shape

Not related to weight issues: changes in hair, skin, wrinkles

When did you start noticing the changes?

How do you feel about these changes?

Any corresponding lifestyle changes?

Can you tell me a story or an experience that made you realise things were changing for you?

13-How have your feelings towards your body throughout the years influenced?

-the way you eat

-your physical activity

-your smoking habits

-your drinking habits,

-the things you do for yourself?

Probe – When did you start noticing changes? How did you feel about those changes?

Hypothetical situations

14-What do you think people expect a women or your age to look like?
How would you like to look?

15- If you could change one thing about your body what would it be?

16- If you gained 20 pounds, how would it affect your life? If you gained 50 pounds, how would it affect your life?

17- If you lost 20 pounds, how would it affect your life?

18- What do you think society expects women's bodies to look like :
(*give situation prompts if needed?)

women in their 20's (young women in university studies., or not?)

women in their 30's (women with small children)

women in their 40's (women with older children, working career women)

women in their 50's (women experiencing the changes of menopause, becoming grandmother, children leaving home)

women in their 60 's (women getting ready for retirement)

women in their 70's? (older women?)

What might men expect women's bodies to look like at different ages?

19-How important are these expectations to you?

Wrap-up using the time line

20- Have any events occurred that prompted a change in your lifestyle habits (eating practices, exercising, smoking, drinking, using drugs prescription or not)

21- Ask for general occurrence and timing of life events, relate them to body image and lifestyle practices as appropriate:

Menarche
Pregnancy
Menopause
Surgeries
Important health problems/health scares
Marriage
Separation
Divorce
Death of a loved one
Sexual harassment, violence, abuse physical and other

22-Would you like to add anything?

Demographic information:

-children: number, age, living at home

-partner: separated, divorced, married, widowed, single

-work

-education level

-age of woman

Appendix E: Codes for Physical Activity

72 (3 4 1) /Behaviors/Exercising/Changes in pattern

73 (3 4 2) /Behaviors/Exercising/Exercise no fun

74 (3 4 3) /Behaviors/Exercising/Exercise needs to be fun

75 (3 4 4) /Behaviors/Exercising/Active living

76 (3 4 5) /Behaviors/Exercising/Exercise motivation

77 (3 4 5 1) /Behaviors/Exercising/Exercise motivation/Social motivation

78 (3 4 5 2) /Behaviors/Exercising/Exercise motivation/Enhances health

79 (3 4 5 3) /Behaviors/Exercising/Exercise motivation/To be fit

80 (3 4 5 4) /Behaviors/Exercising/Exercise motivation/Appearance

81 (3 4 5 5) /Behaviors/Exercising/Exercise motivation/For self

82 (3 4 5 6) /Behaviors/Exercising/Exercise motivation/Weight

83 (3 4 7) /Behaviors/Exercising/Influence on Body image

84 (3 4 8) /Behaviors/Exercising/Control through exercise

85 (3 4 9) /Behaviors/Exercising/Barriers

86 (3 4 10) /Behaviors/Exercising/Fitness testing

87 (3 4 11) /Behaviors/Exercising/Integration exercise and self

88 (3 4 12) /Behaviors/Exercising/Should exercise

89 (3 4 14) /Behaviors/Exercising/Importance

90 (3 4 15) /Behaviors/Exercising/Frequency

91 (3 4 16) /Behaviors/Exercising/Compulsive

92 (3 4 17) /Behaviors/Exercising/Effect of exercise

Appendix F: Profile of Midlife Women

Alyssa: age 57, married with two adult children, works in a hospital as a dietitian, saw counselor for stress around caregiver role with dying father.

Betty: age 55, six adult children, youngest son still living at home, divorced from her husband in her early 40's, on own with live-out partner, runs consulting business on organizational management.

Brenda: age 55, married for 36 years, 2 adult children who are both married, 2 grandchildren, former school teacher, retired several years ago.

Cassy: age 44, separated from husband two years ago, 3 children living at home, works as a nursing instructor as well as student in Ph.D. program.

Corrine: age 61, long term marriage, 2 adult children, Masters degree in library science, retired, helps with condo administration.

Deanna: age 55, married for 27 years, 3 adopted children, husband is blind, son with mental illness, works as a nurse.

Dina: age 56, recently divorced after long term marriage, 2 adult children, works in office administration.

Emily: age 46, divorced 10 years ago, 3 teenage children living at home, works as nurse consultant.

Eugenia: age 44, divorced 11 years ago, 4 sons living at home, works as a medical doctor in family practice.

Gail: age 47, married, one child living at home, Masters degree in English, working as a high school teacher.

Hannah: age 47, widowed in 1988, no current boyfriend, no children, high school education, presently at home.

Holly: age 52, married for 29 years (with a 21/2 year separation a few years ago), works as a nurse, 3 adult children.

Irene: age 56, single, never married, post secondary education, works in a health organization.

Jill: age 45, swing dancer and instructor, in 3rd marriage, two teenage sons from 2nd marriage, one son is blind.

Karen: age 52, married for 22 years, 4 adult children, 2 foster children, grandchildren, works as a nurse with seniors, on medication for depression.

Lisa: age 52, separated for 2 years, married for 31 years, one daughter living in Vancouver, presently looking for work.

Marion: age 45, married for 28 years, 2 adult daughters, living in rural community, on medication for depression.

Nadine: age 57, separated 3 years ago from husband, recently retired from work as a schoolteacher.

Nancy: age 47, two adult children living in Ontario, works as a nurse in a nursing home, separated 10 years ago, widowed 2 years ago.

Patricia: age 52, married for 25 years, 3 adult children, moved from Holland one year ago, presently at home.

Theresa: age 58, single, separated 27 years ago, two adult sons, works as a seamstress, has primary education.

Valerie: age 50, separated years ago from husband but now back together, one daughter, works as an artist, moved from England 5 years ago.

Vicki: age 53, single, never married, no children, presently in Ph.D. studies, works as a consultant.

Wendy: age 57, in common-law relationship, no children, works in human resources.